



Health

STATE OF HAWAII
PROGRAM TITLE:

HEALTH

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: **05**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	5,634.9	2,424.8	- 3,210.1	57	5,640.7	2,464.9	- 3,175.8	56	5,640.7	2,692.4	- 2,948.3	52
EXPENDITURES	850,308	832,156	- 18,152	2	307,362	181,984	- 125,378	41	594,471	656,019	61,548	10
TOTAL COSTS												
POSITIONS	5,634.9	2,424.8	- 3,210.1	57	5,640.7	2,464.9	- 3,175.8	56	5,640.7	2,692.4	- 2,948.3	52
EXPENDITURES	850,308	832,156	- 18,152	2	307,362	181,984	- 125,378	41	594,471	656,019	61,548	10
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. MORTALITY RATE (PER THOUSAND)					6.4	6.1			6.7	6.5		
2. AVERAGE LIFE SPAN OF RESIDENTS					79	79			78	78		

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

PROGRAM TITLE: HEALTH

05

Part I - EXPENDITURES AND POSITIONS

The variance in the Health Program position counts is generally attributed to vacancies due to budget constraints, personnel turnovers and recruitment difficulties. The variance in expenditures is the net effect of position vacancies, collective bargaining augmentation and increases in federal fund expenditures from additional grant awards. Details of the position and expenditure variances are best examined at the lowest program level.

Part II - MEASURES OF EFFECTIVENESS

Specific variances are discussed in detail in the lowest level program narratives.

STATE OF HAWAII
PROGRAM TITLE:

HEALTH RESOURCES

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: 0501

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES															
OPERATING COSTS POSITIONS EXPENDITURES	1,272.0 262,592	1,139.5 262,490	- -	132.5 102	10	1,280.6 115,000	1,149.1 86,102	- -	131.5 28,898	10 25	1,280.6 164,677	1,279.1 220,355	- -	1.5 55,678	34
TOTAL COSTS POSITIONS EXPENDITURES	1,272.0 262,592	1,139.5 262,490	- -	132.5 102	10	1,280.6 115,000	1,149.1 86,102	- -	131.5 28,898	10 25	1,280.6 164,677	1,279.1 220,355	- -	1.5 55,678	34
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06						
					PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%	
PART II: MEASURES OF EFFECTIVENESS															
1. %WOMEN GIVING BIRTH REC PRENATAL CARE 1ST TRIMSTR					43.7	49	+	5	11	43.7	49	+	5	11	
2. TB NEW CASE RATE, % COMPLETING THERAPY					90	87	-	3	3	90	90				
3. % REPT VACC-PREVENTABLE DISEASES INVESTIGATED					90	95	+	5	6	90	95	+	5	6	
4. % INDIVS W/DEV DISAB RECEIVING SERVICES					30	29	-	1	3	30	32	+	2	7	
5. % OF AMBULANCE SERVICE REVENUES COLLECTED					63.3	72	+	8	13	65	72	+	7	11	
6. % NORMAL BIRTH WT INFANTS REC SUBS CHLD HTH SVC					NA	NA				NA	NA				
7. % PERSONS IN INSTITUTIONS RECV DENTAL SVCS					90	90				92	90	-	2	2	

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII
PROGRAM TITLE:

TUBERCULOSIS CONTROL

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: **HTH - 101**

PROGRAM STRUCTURE NO: **05010101**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES															
OPERATING COSTS POSITIONS EXPENDITURES															
	36.0	28.0	-	8.0	22	34.0	27.0	-	7.0	21	34.0	34.0			
	3,830	3,284	-	546	14	968	690	-	278	29	2,867	3,145		278	10
TOTAL COSTS POSITIONS EXPENDITURES															
	36.0	28.0	-	8.0	22	34.0	27.0	-	7.0	21	34.0	34.0			
	3,830	3,284	-	546	14	968	690	-	278	29	2,867	3,145		278	10
						FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
						PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%
PART II: MEASURES OF EFFECTIVENESS															
1. NEW TB CASE RATE/100000 FOR-BRN RESDNTS OF =>5YRS						4	3	-	1	25	4	4			
2. NEW TB CASE RATE/100000 FOR-BRN RESDNTS OF < 5YRS						5	4	-	1	20	5	4	-	1	20
3. NEW TB CASE RATE PER 100000 U.S. BORN						2	1	-	1	50	2	2			
4. NEW TB CASES, NUMBER UNDER 6 YEARS OF AGE						2	2				2	2			
5. TB CASES, % COMPLETING THERAPY						90	87	-	3	3	90	90			
6. % PATIENTS COMPLETG PREVENTIVE THER FOR LATENT TB						60	51	-	9	15	60	55	-	5	8
PART III: PROGRAM TARGET GROUP															
1. ACTIVE TB CASES NUMBER DIAGNOSED DURING YEAR.						150	116	-	34	23	150	130	-	20	13
2. ACTIVE & SUSPECT TB CASES - # ON CURR TB REGISTRY						300	292	-	8	3	300	300			
3. TB SCREENG& EVAL- # OF NEW SCHOOL ENTERERS						16,000	17,000	+	1,000	6	16,000	17,000	+	1,000	6
4. TB SCREENG & EVAL - # OF CLOSE CONTACTS						800	422	-	378	47	800	700	-	100	13
5. TB SCREENG & EVAL - # OF RECENT IMMIGRANTS (100'S)						35	39	+	4	11	35	35			
PART IV: PROGRAM ACTIVITIES															
1. # TUBERCULIN SKIN TESTS GIVEN IN SURVEY (1000'S)						55	54	-	1	2	55	55			
2. # X-RAYS GIVEN IN SURVEY (1000'S)						18	17	-	1	6	18	17	-	1	6
3. CHEST CLINIC PATIENTS, NUMBER SERVED						5,000	3,723	-	1,277	26	5,000	4,000	-	1,000	20
4. # OF NEW TB CASES STARTING CHEMOTHERAPY						400	384	-	16	4	400	400			
5. # NEW PATIENTS W/LATENT TBI STARTING PREV THERAPY						3,000	2,470	-	530	18	3,000	2,500	-	500	17

PROGRAM TITLE: Tuberculosis Control

PART I-EXPENDITURES AND POSITIONS

In FY 2005 and 2006, position and expenditure variances are due primarily to position vacancies within the Branch.

PART II-MEASURES OF EFFECTIVENESS

- 1,2. Hawaii has always had a high proportion of foreign-born TB cases due to its geographic location as a destination for immigration and close proximity to high burden TB areas. Although the case rate decreased in 2004, Hawaii always has a large proportion of foreign-born TB cases and expects this trend to continue.
3. The US-born case rate may reflect patients born in Hawaii with return or travel to TB-endemic areas. This is common due to the military population and international population traveling to and from Asia and the Pacific Jurisdictions (both areas with high rates of TB). The expected case rate is 1.0-2.0/100,000.
6. Treatment for latent TB infection (LTBI) can take 9 months or more, and completion is often difficult without direct observation, support and encouragement. Difficulties in completion have been observed among mobile populations such as the military, students or persons from Compact of Free Association (COFA) nations. Unfortunately, this is a national trend where 9 months of therapy is often not completed. Unlike active TB where directly observed therapy (DOT) is encouraged, treatment for LTBI has **not** been directly observed by the TB Program due to the high volume of clients and lack of DOT staff.

PART III-PROGRAM TARGET GROUP

1. Hawaii has reported an average of ~167 TB cases/yr in the past decade, with annual fluctuations. As recently as 1996 Hawai'i reported 200 cases and a low of 116 cases in 2004. Foreign-born cases account for >80% of Hawai'i's cases, and often occur in the elderly. Immigration regulations and economic fluctuations often affect migration patterns and the TB morbidity in Hawaii.
4. After a federal grant for a dedicated nurse for Contact Investigation (CI) was completed, there was no FTE or state funds for dedicated a CI nurse. Thus the CI of cases in 2004 was reduced to a part-time Nurse and other staff who could cover in the interim. Now that an FTE and state funding have been secured in the budget, CI services should be restored to higher levels of screening and evaluation of contacts.

5. Changes in immigration laws, legal scrutiny over immigration, and restrictions on travel and visas have reduced the actual number of immigrants entering Hawai'i as reported by immigration officials and the US Quarantine Office.. However, this screening does not affect travelers from COFA countries, or residents of Hawai'i who travel extensively to countries such as China or the Philippines, where TB is endemic.

PART IV-PROGRAM ACTIVITIES

3. This number is dependent on how many TB cases are diagnosed (the US and Hawaii case rates have both decreased) and how the TB Branch and private sector treat TB cases. There have also been recent reports of changes in treatment of TB cases in the Philippines (pre-treatment), which may make it more difficult to diagnose active, drug-sensitive TB after arrival of Filipino immigrants in Hawaii (the Philippines are the primary source country for TB cases in Hawaii).
5. Treatment of patients with latent TB infection remains a difficult task since treatment is not mandatory. Often, mobile populations such as COFA nationals, military personnel, or students, may not be able to start and complete treatment due to personal circumstances. The TB Branch is also part of a new Centers for Disease Control and Prevention (CDC) Research Consortium, and will study obstacles to treatment of LTBI in Hawaii, viewed as difficult both here and on the US Mainland. With new incentives and enablers funded by other grantors the patient census may increase for clients served in Clinic.

STATE OF HAWAII
PROGRAM TITLE:
PROGRAM-ID:
PROGRAM STRUCTURE NO:

HANSEN'S DISEASE SERVICES
HTH - 111
05010102

VARIANCE REPORT

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES												
OPERATING COSTS POSITIONS EXPENDITURES	71.0 5,144	68.0 5,408	- 264	3.0 5	71.0 1,853	65.0 1,464	- 389	6.0 21	71.0 3,550	71.0 4,011	461	13
TOTAL COSTS POSITIONS EXPENDITURES	71.0 5,144	68.0 5,408	- 264	3.0 5	71.0 1,853	65.0 1,464	- 389	6.0 21	71.0 3,550	71.0 4,011	461	13
PART II: MEASURES OF EFFECTIVENESS												
1. % INPAT CASES RELAPSE OF PRIOR TRTD HANSENS DIS												
2. % INPATIENTS REC ANTIMICROB THERAPY FOR HAN DIS	20	16	-	4	20	20			1	16	-	100
3. % INPATIENT CASES W/ NEURO DISABILITY	100	100			100	100			100	100		20
4. % INPAT CASES W/ RENAL DISABILITY	30	18	-	12	40	27			20	20	-	26
5. % INPATIENT CASES W/ OPHTHALMOLOGIC DISABILITY	100	100			100	100			100	100		
6. NEW HANSEN CASE RATE PER 100000 RES 5YRS OR MORE	1	1			1	1			1	1		
7. % PATIENTS TERMINATE TRTMT DUE TO NONCOMPLIANCE	1		-	1	100	1			1		-	100
8. %NEW HANS DIS CASES DIAG CONTACT/HI RSK POP SCRNG	30	35	+	5	17	30			25	25	-	17
9. MEDIAN # MONTHS BETW ONSET OF HANSENS & DIAGNOSIS	12	9	-	3	25	12			12	12		
10. % OUTPATIENTS W/COMPLICATIONS FROM HANSENS DIS	1	3	+	2	200	1			2	2	+	100
PART III: PROGRAM TARGET GROUP												
1. TOTAL NUMBER OF INPATIENT REGISTRY	34	36	+	2	6	32			36	36	+	13
2. INPATIENT NURSING CARE HOME DAYS/YEAR	2,500	2,157	-	343	14	2,500			2,920	2,920	+	17
3. INPATIENT HALE MOHALU HOSPITAL DAYS/YEAR	3,900	2,738	-	1,162	30	4,000			3,000	3,000	-	25
4. INPATIENT ACUTE CARE HOSPITAL DAYS/YEAR	270	49	-	221	82	270			120	120	-	56
5. INPATIENT COMMUNITY RESIDENTS (OAHU)	1	1				1			1	1		
6. # NEW HANSENS CASES DIAGNOSED DURING YEAR	20	17	-	3	15	20			20	20		
7. # PATIENTS RECVG CARE THRU HD COMMUNITY PROG	275	260	-	15	5	275			250	250	-	9
8. # HOUSEHOLD CONTACTS UNDER SURVEILLANCE	600	654	+	54	9	600			660	660	+	10
9. # OUTPATIENTS W/HANSENS DIS RELATED DISABILITIES	135	139	+	4	3	135			140	140	+	4
10. # HIGH-RISK PEOPLE WHO RECEIVE OUTREACH SERVICES	NA	NA				NA			NA	NA		
PART IV: PROGRAM ACTIVITIES												
1. # INPATIENT ANNUAL PHYS EXAMS BY MD'S	34	36	+	2	6	32			35	35	+	9
2. # INPATIENTS FOR ANNUAL REHAB ASSESSMENTS	34	36	+	2	6	32			35	35	+	9
3. # INPATIENTS SEEN BY CARDIOLOGY CONSULTANT	28	10	-	18	64	28			15	15	-	46
4. # CASES SEEN BY OPHTHALMOLOGY CONSULTANT	34	25	-	9	26	32			28	28	-	13
5. # CASES FOLLOWED BY HOME CARE RN AT KALAUPAPA	16	24	+	8	50	18			30	30	+	67
6. # HANSEN'S OUTPATIENT EXAMS BY HDPC STAFF	3,700	2,887	-	813	22	3,700			3,000	3,000	-	19
7. # HAND, FOOT & EYE SCREENS PERFORMED BY HDPC RPN'S	200	235	+	35	18	200			150	150	-	25
8. # HANSENS OUTPATIENT VISITS BY HDPC SW'S, PMA'S	2,200	1,913	-	287	13	2,200			1,800	1,800	-	18
9. # HANSENS CONTACTS EXAMINED DURING YEAR	375	213	-	162	43	375			200	200	-	47
10. # HIGH RISK PEOPLE SCREENED DURING YEAR	350	446	+	96	27	350			400	400	+	14

TITLE: Hansen's Disease Services

PART I – EXPENDITURES AND POSITIONS

As of June 30, 2005, 68 of 72 positions were filled. As of September 30, 2005, 65 of 72 positions were filled. All positions are expected to be filled by the end of FY 2006. Expenditure variance for FY 2005 is a result of purchasing items to address audit identified deficiencies and the funding of a new physician services contract. \$225,000 was transferred within the Department to fund the expenditures. FY 06 first quarter actual expenditures were lower than budgeted due to the cancellation of the emergency repair project of the Kalaupapa Harbor. \$300,000 was transferred from 3rd and 4th quarter budgets to fund the repairs in the 1st quarter of FY 06. The remainder of the variance is due to the vacancy of several positions due to recent retirements or terminations.

PART II – MEASURES OF EFFECTIVENESS

1. Positive variance is due to revised projection that no relapses will occur during the year.
2. Planned figures were mistakenly input as patient count and not percentage.
4. Planned figure was mistakenly input as patient count and not percentage. The number of patients with renal disability is highly variable and difficult to estimate due to the advanced age of the population.
7. Positive variance due to diligent case management.
8. Positive variance due to continued program efforts and dedication of resources to screen and educate contacts and high risk groups.
9. Positive variance is due to active screening of the high risk group. Emphasis on the high risk group resulted in earlier detection and diagnosis of HD.
10. Variance due to emphasis of case management for early detection/prevention of complications. Also as patient ages other health conditions increases risk of HD related complications.

PART III – PROGRAM TARGET GROUP

2. Inpatient care home days were lower than planned due to a higher than anticipated number of patients out on medical pass for specialty level of care. Variance also due to increased

effort to keep patients in their homes and out of the Care Home setting if possible and if desired by the patient.

3. Inpatient Hale Mohalu days were lower than planned due to a shorter average stay per patient. Patients have expressed a greater desire to return to Kalaupapa.
4. The significant variance is due to the death of a patient who was a long time resident of an acute facility. Also, patients are requiring shorter stays in acute facilities.
6. Variance in number of new cases diagnosed due to ambitious goals set for fiscal year 2005 despite increase in number of high risk people screened and two Public Health Nurse vacancies.
8. Positive variance is due to two neighbor island clinics held during this fiscal year which focused on screening the contacts of confirmed cases.

PART IV – PROGRAM ACTIVITIES

3. The variances are due to the adoption of a new methodology in accounting for patient cases. The change has resulted in more accurate data.
4. The variances are due to the adoption of a new methodology in accounting for patient cases. The change has resulted in more accurate data.
5. The actual number of patients followed by a home care nurse is greater than planned due to the increased efforts to keep patients in their homes.
6. Variance due to two Public Health Nurse positions vacancies for 6 months.
7. Positive variance due to program's shift of priority to case management in an effort to detect/prevent complications.
8. Variance is due to the PMAs' priorities being shifted to locating high risk groups.
9. Variance due to Program's need to redefine area of emphasis to maximize the effectiveness of the staff due to two Public Health Nurse vacancies. Emphasis redirected to case management to prevent/detect complications and screen high risk groups.
10. Positive variance due to the program's emphasis on allocating resources to identifying and screening high-risk population which includes two neighbor island clinics.

STATE OF HAWAII
PROGRAM TITLE:

STD/AIDS PREVENTION SERVICES

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: **HTH - 121**

PROGRAM STRUCTURE NO: **05010103**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	19.5	17.0	-	2.5	13	19.5	17.0	-	2.5	13	19.5	18.0
EXPENDITURES	10,125	11,208	1,083	11	6,284	5,002	-	1,282	20	5,139	6,420	1,281
TOTAL COSTS												
POSITIONS	19.5	17.0	-	2.5	13	19.5	17.0	-	2.5	13	19.5	18.0
EXPENDITURES	10,125	11,208	1,083	11	6,284	5,002	-	1,282	20	5,139	6,420	1,281
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. GONORRHEA CASE RATE PER 100,000					115	95	-	20	17	115	85	-
2. INFECTIOUS SYPHILIS CASES PER 100,000					1	1	-			1	1	-
3. CHLAMYDIA CASES PER 100,000					430	422	-	8	2	430	410	-
4. NO. OF NEW AIDS CASES PER 100,000 PER YEAR					9	10.4	+	1	11	9	9	-
PART III: PROGRAM TARGET GROUP												
1. RESIDENT POPULATION, STATE OF HAWAII (000)					1,244	1,263	+	19	2	1,244	1,263	+
PART IV: PROGRAM ACTIVITIES												
1. NUMBER OF STD PATIENT VISITS					4,800	4,401	-	399	8	4,800	4,400	-
2. # WOMEN SCREENED FOR CHLAMYDIA					17,900	17,339	-	561	3	17,900	17,400	-
3. # OF HIV ANTIBODY TESTS PERFORMED					8,300	8,437	+	137	2	8,300	8,300	-
4. NO. OF STERILE SYRINGES EXCHANGED					440,000	419,978	-	20,022	5	440,000	420,000	-
5. # HIV DRUG TREATMENT PRESCRIPTIONS FILLED					10,000	10,065	+	65	1	10,000	10,000	-
6. # HIV PREVENTION RISK REDUCTION CONTACTS					1,250	1,250	-			1,250	1,250	-
7. # AIDS CASES REPORTED					110	132	+	22	20	110	110	-
8. # HIV CASES PARTICIPATING IN CASE MANAGEMENT					950	950	-			950	950	-
9. # HSPAMM PATIENT VISITS FOR IMMUNE SYS MONIT					1,400	1,349	-	51	4	1,400	1,400	-
10. # CLIENTS PROVIDED HIV DRUG TREATMT ASSTT					350	307	-	43	12	350	305	-

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 01 03
HTH 121

PROGRAM TITLE: STD/AIDS PREVENTION SERVICES

Part I – EXPENDITURES AND POSITIONS

FY 05. Expenditure variance is due to collective bargaining augmentation and receipt of special funds for the HIV Drug Assistance and the Hawaii Seropositivity and Medical Management Programs. Position variance is due to staff vacancies.

FY 06. Expenditure variance is due to delays in implementing Purchase of Services contracts.

Part II – MEASURES OF EFFECTIVENESS

Item 1. The gonorrhea case rate per 100,000 per population has decreased for the first time in six years. The estimated case rate of 115 cases per 100,000 population was based on the number of gonorrhea cases increasing at the same rate as the year before. The actual gonorrhea case rate declined by 9%. The conversion to a more sensitive (nucleic acid amplification test) in the chlamydia screening program which now detects both chlamydia and gonorrhea was partly responsible for the increase in gonorrhea cases over the past two years. We anticipate that a decline in the gonorrhea case rate will continue in FY 2006

Item 5. The planned number of new AIDS cases per 100,000 population has increased due to active surveillance which captured earlier unreported AIDS cases in one major hospital.

PART III – PROGRAM TARGET GROUP

No significant variance.

PART IV - PROGRAM ACTIVITIES

Item 7. The number of AIDS cases reported has increased due to active surveillance which captured earlier unreported AIDS cases in one major hospital.

Item 10. The number of clients provided HIV drug treatment assistance has decreased due to a higher per client utilization and increasing medication costs. Due to the higher per client utilization and increasing medication costs the program has lowered the estimated number of clients for FY 2006.

STATE OF HAWAII

PROGRAM TITLE:

DISEASE OUTBREAK CONTROL

PROGRAM-ID:

HTH - 131PROGRAM STRUCTURE NO: **05010104****VARIANCE REPORT**

REPORT V61

11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06					
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%		
PART I: EXPENDITURES & POSITIONS														
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES														
OPERATING COSTS POSITIONS EXPENDITURES	42.0 13,952	38.0 14,027	- 75	4.0 1	10	43.0 2,980	38.0 2,411	- -	5.0 569	12 19	43.0 8,943	43.0 9,535	592 7	
TOTAL COSTS POSITIONS EXPENDITURES	42.0 13,952	38.0 14,027	- 75	4.0 1	10	43.0 2,980	38.0 2,411	- -	5.0 569	12 19	43.0 8,943	43.0 9,535	592 7	
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%		
PART II: MEASURES OF EFFECTIVENESS														
1. INDIGNEOUS MEASLES CASE RATE PER 100,000					2	4	+	2	100	2	4	+	2	100
2. INDIGENOUS PERTUSSIS CASE RATE PER 100,000					90	95	+	5	6	90	95	+	5	6
3. % REPORTED VACC-PREVENTABLE DISEASES INVESTIGATED					95	100	+	5	5	95	100	+	5	5
4. % REPORTED FOOD COMPLAINTS INVESTIGATED					100	100				100	100			
5. % REPORTED ZOONOTIC DISEASES INVESTIGATED.					99	99				99	99			
6. % SCH STDTS MEETING IMMZ REQ AFTER FOLLOW-UP					100	99	-	1	1	99	99			
7. % PRESCHOOLERS MEETING IMMZ REQ AFTER FOLLOW-UP					100	100				100	100			
8. % INF BORN TO HEP B CARR STARTG HEP B SERIES					86	92	+	6	7	86	92	+	6	7
9. % IDENT SUSCEP IMMIGS COMPLETING HEP B SERIES														
PART III: PROGRAM TARGET GROUP														
1. TOTAL # HAWAII RESIDENTS (1000'S)					1,258	1,262	+	4		1,258	1,262	+	4	
2. TOTAL # VISITORS TO HAWAII (1000'S)					2,000	6,897	+	4,897	245	2,000	6,897	+	4,897	245
3. TOTAL # CHILDREN ATTENDING LIC PRESCHOOLS (1000'S)					17	19	+	2	12	17	19	+	2	12
4. TOTAL # STDTS ATTENDING HAWAII SCHOOLS (1000'S)					217	233	+	16	7	217	233	+	16	7
5. NUMBER OF BIRTHS EXCLUDING MILITARY (100'S)					175	155	-	20	11	175	155	-	20	11
6. TOT# CHDRN BORN TO HEP B SURF ANTGN+ WOMEN (100'S)					200	211	+	11	6	200	200			
PART IV: PROGRAM ACTIVITIES														
1. # SCH CHLD SURVEYED FOR IMM COVERAGE (1000S)					216	231	+	15	7	216	231	+	15	7
2. # HEP B VACCINE DOSES ADMIN TO HIGH RISK PERSONS					7,438	6,753	-	685	9	7,438	6,000	-	1,438	19
3. # OF NEW HEP B REGISTRANTS					4,711	2,228	-	2,483	53	4,711	2,000	-	2,711	58
4. # COMMUNICABLE DISEASE CASES INVESTIGATED					700	2,533	+	1,833	262	700	2,533	+	1,833	262
5. # PRESCHOOLERS SURVEYED FOR IMMZ COVERAGE (1000'S)					17	19	+	2	12	17	19	+	2	12

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 01 04
HTH 131

PROGRAM TITLE: Disease Outbreak Control

Part I - EXPENDITURES AND POSITIONS

The variance in expenditures in the first quarter FY 06 is due to contract delays and savings in payroll and related operating expenses due to staff turnover. The variance in positions is due to staff vacancies that the program is in the process of recruiting for.

Part II - MEASURES OF EFFECTIVENESS

2. Increased national publicity regarding older children, adolescents, and adults as pertussis transmission sources drastically increased the amount of laboratory testing resulting in increased identification of cases.

Part III - PROGRAM TARGET GROUPS

2. Under estimated the number of visitors to Hawai'i based on the Department of Business, Economic Development & Tourism statistics.
3. Under estimated the preschool enrollment.
5. Birthrate is less than estimated.

Part IV - PROGRAM ACTIVITIES

2. Decrease due to clinic closure and referral of patients to other community clinics.
3. Decrease due to clinic closure and referral of patients to other community clinics.
4. Increase due to increased surveillance and more laboratory testing and identification of cases.
5. The planned amount was incorrect. The amount should have been 17.

STATE OF HAWAII
PROGRAM TITLE:

DENTAL DISEASES

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: **HTH - 141**

PROGRAM STRUCTURE NO: **050102**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	±	CHANGE	%	BUDGETED	ACTUAL	±	CHANGE	%	BUDGETED	ESTIMATED	±	CHANGE	%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS	25.6	25.6				25.0	25.0				25.0	25.0			
EXPENDITURES	1,610	1,512	-	98	6	668	502	-	166	25	1,095	1,213		118	11
TOTAL COSTS															
POSITIONS	25.6	25.6				25.0	25.0				25.0	25.0			
EXPENDITURES	1,610	1,512	-	98	6	668	502	-	166	25	1,095	1,213		118	11
						FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
						PLANNED	ACTUAL	±	CHANGE	%	PLANNED	ESTIMATED	±	CHANGE	%
PART II: MEASURES OF EFFECTIVENESS															
1. % PRE-SCH & SCH-AGE CHILDREN REC ORAL HEALTH ED SVS						25	23	-	2	8	25	23	-	2	8
2. % HTH CARE SVS PROV REC ORAL HTH TRAINING						15	10	-	5	33	15	10	-	5	33
3. % PERSONS IN INST RECEIVG DENTAL SERVICES						92	90	-	2	2	92	90	-	2	2
PART III: PROGRAM TARGET GROUP															
1. SCHOOL-AGED CHILDREN						218,000	200,000	-	18,000	8	218,000	200,000	-	18,000	8
2. PERSONS RESIDG IN EXT CARE FACIL OR CARE HOMES						8,000	8,000				8,000	8,000			
3. LOW INCOME PERSONS UNABLE TO AFFORD DENTAL CARE						1,000	1,000				1,000	1,000			
4. PERSONS IN DOH INSTITUTIONS						800	250	-	550	69	800	250	-	550	69
5. PRESCHOOL-AGE CHILDREN						22,000	20,000	-	2,000	9	22,000	20,000	-	2,000	9
6. PRE- AND POST-NATAL MOTHERS						18,000	18,000				18,000	18,000			
7. PERSONS OVER 65 YEARS OF AGE						125,000	125,000				125,000	125,000			
8. PERSONS WHO ARE HOMELESS						6,000	6,000				6,000	6,000			
9. PERSONS W/ MENTAL, PHYS AND/OR DEV DISABILITIES						17,500	17,500				17,500	17,500			
PART IV: PROGRAM ACTIVITIES															
1. # SCH CHILDREN PROVIDED DENTAL HTH EDUC						75,000	40,000	-	35,000	47	75,000	40,000	-	35,000	47
2. # SCH CHILDREN PROVIDED TOPICAL FLUORIDE APPS						10,200	8,100	-	2,100	21	10,200	8,100	-	2,100	21
3. # PERSONS IN INSTITUTIONS RECVG DENTAL TRTMT						200	204	+	4	2	200	200			
4. # PERSONS RECVG DENTAL TRTMT AT DOH CLINICS						2,400	1,988	-	412	17	2,400	2,000	-	400	17
5. # CLIENT VISITS AT DOH CLINICS						7,400	6,505	-	895	12	7,400	6,550	-	850	11
6. # PERSONS RECEIVING ORAL HEALTH EDUCATION						125,000	70,000	-	55,000	44	125,000	70,000	-	55,000	44
7. # DENTAL PROCEDURES PERFORMED AT DOH CLINICS						13,000	15,226	+	2,226	17	13,000	15,000	+	2,000	15

Variance Report Narrative
FY 2005 and FY 2006

05 01 02

HTH 141

PROGRAM TITLE: Dental Diseases

PART I – POSITIONS AND EXPENDITURES

FY 2004-05

The net expenditure variance was due to difficulty filling vacant positions throughout the year as well as collective bargaining augmentation.

FY 2005-06

The first quarter variance is due to continued difficulty in filling vacant positions and the delayed encumbrance of a grant-in-aid contract.

The variance in the last three quarters is due to collective bargaining augmentation and the execution of the first quarter grant-in-aid contract.

PART II – MEASURES OF EFFECTIVENESS

The variance is attributed to difficulty in filling vacant positions as well as the loss of a hygienist position.

PART III – PROGRAM TARGET GROUP

- 4.) In fiscal year 2005 and 2006, the variance is due to the discontinuation of services to the Hawaii Health Systems Corporation as a result of limitations on dental division's funding and staffing. The branch will continue to provide comprehensive dental services to patients in state operated facilities, Hawaii State Hospital, Kalaupapa, Hale Mohalu, and community-placed clients from Waimano Training School and Hospital. These facilities house clients with special needs that the branch staff are trained to treat.

PART IV – PROGRAM ACTIVITIES

1.), 2.) In both fiscal years, the variance is due to difficulty in recruiting and retaining dental hygienists to provide the topical fluoride applications and dental health education. The private sector compensation rate is much greater than the current civil service rate making filling of these positions difficult.

4.), 5.) In both fiscal years, fewer unduplicated individuals than anticipated received dental treatment and the number of client visits to the clinic decreased. In fiscal year 2005, the Dentist IV remained vacant for the entire year and the vacant Dental Assistant II for six months. These vacancies reduced the number of clients that the clinic was able to service. In fiscal year 2006, continuing recruitment difficulties for dentists is expected to impact the number of clients served.

6.) In both fiscal years, the filling of vacant positions will have an impact on the number of persons receiving dental health education.

7.) In both fiscal years, the dental health staff worked efficiently to increase the number of procedures provided at each appointment. By prioritizing available treatment services and temporarily suspending the fabrication of removable prosthodontics, it allowed staff to focus on more diagnostic, preventive, and restorative procedures.

STATE OF HAWAII

PROGRAM TITLE:

PROGRAM-ID:

PROGRAM STRUCTURE NO: 050103

EMERGENCY MEDICAL SVCS & INJURY PREV SYS

VARIANCE REPORT

REPORT V61

11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06					
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%		
PART I: EXPENDITURES & POSITIONS														
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES														
OPERATING COSTS POSITIONS EXPENDITURES														
TOTAL COSTS POSITIONS EXPENDITURES														
	16.0	16.0			17.0	16.0	- 1.0	6	17.0	17.0				
	41,610	42,259	649	2	44,048	14,561	- 29,487	67	6,781	36,283	29,502	435		
	16.0	16.0			17.0	16.0	- 1.0	6	17.0	17.0				
	41,610	42,259	649	2	44,048	14,561	- 29,487	67	6,781	36,283	29,502	435		
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%		
PART II: MEASURES OF EFFECTIVENESS														
1. AVERAGE URBAN RESPONSE TIME - OAHU (MINUTES)					8.9	10.5	+	1	11	8.9	10.5	+	1	11
2. AV SUBURB/RURAL RESPONSE TIME - OAHU (MINUTES)					10.5	12.0	+	1	10	10.5	12.0	+	1	10
3. AVERAGE RESPONSE TIME - KAUAI (MINUTES)					8.8	8.2				8.8	8.2			
4. AVERAGE RESPONSE TIME - HAWAII (MINUTES)					9.8	9.5				9.8	9.5			
5. AVERAGE RESPONSE TIME - MAUI (MINUTES)					10.5	11.4				10.5	11.4			
6. % AMBULANCE SERVICE REVENUES COLLECTED					63.3	72.0	+	8	13	63.3	72.0	+	8	13
7. % INCR IN COMM COAL/PARTN INIT & SPPT INJ PREV					12	11	-	1	8	12	12			
8. % INCR IN # PERSONS TRAINED IN INJ PREVENTION					10	10				10	10			
9. % CHILD SAFETY SEAT USE (AGE 0-4) STATEWIDE					90	78	-	12	13	90	90			
10. % OF SEAT BELT USE STATEWIDE					95	95				95	95			
PART III: PROGRAM TARGET GROUP														
1. GENERAL DE FACTO POPULATION (000'S)					1,338	1,338				1,338	1,338			
2. # HIGH RISK CARDIAC CASES					5,511	5,960	+	449	8	5,511	5,960	+	449	8
3. # HIGH RISK TRAUMA CASES					6,200	7,012	+	812	13	6,200	7,012	+	812	13
4. # HIGH RISK PEDIATRIC PATIENTS					1,241	1,186	-	55	4	1,241	1,186	-	55	4
5. # CARDIOPULMONARY ARREST CASES					1,303	1,246	-	57	4	1,303	1,246	-	57	4
6. # LICENSED GROUND AMBULANCE SERVICE PROVIDERS					5	6	+	1	20	5	6	+	1	20
7. # LICENSED AIR AMBULANCE SERVICE PROVIDERS					3	3				3	3			
8. # EMERGENCY AMBULANCE CALLS					73,544	74,356	+	812	1	73,544	74,356	+	812	1
9. # SURVEILLANCE SYSTEMS TRACKING & ANALYZING INJURY					9	9				9	9			
10. # CHDRN <18 YRS TARGETED FOR INJ PREVENTION PROGS					296,000	296,000				296,000	296,000			
PART IV: PROGRAM ACTIVITIES														
1. ADM & ENFORCE STATE EMS RULES & REGS (STAFF-DAYS)					318	318				318	318			
2. ADM & MAINT EMS COMM. SYSTEM (STAFF-DAYS)					110	110				110	110			
3. ADM & MAINT EMS/INJ PREV DATA COLL/EVAL (ST-DY)					178	178				178	178			
4. # PATIENTS BILLED FOR EMERG AMBUL SVS					62,500	68,295	+	5,795	9	62,500	68,295	+	5,795	9
5. ADM & MAINT COMMUN INJ PREV COALITIONS (ST-DYS)					804	804				804	804			
6. ADM/MAINT EMS QUAL ASSUR & QUAL IMPRV PRG (ST-DYS)					215	215				215	215			
7. # COMMUN ED & RESEARCH PROJ ON EMS, INJ PREVENTN					15	16	+	1	7	15	15			
8. ADM/MAINT EMERG STATE HTH PREP PLAN & EXER PARTIC					260	260				260	260			
9. # INJURY PREVENTION ACTIVITIES INITIATED/SUPPORTED					160	160				160	160			
10. # PARENTS/CAREGVRS RECVG CHILD PASSENGER SAFETY ED					8,514	7,246	-	1,268	15	8,514	8,514			

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 03
HTH 730

PROGRAM TITLE: EMERGENCY MEDICAL SVCS & INJURY PREV SYS

Part I – EXPENDITURES AND POSITIONS

The variance in expenditures for FY05 budgeted and actual are due to additional funds transferred-in from other DOH programs for increased expenditures in ambulance service, ambulance billing service, and MEDICOM service contracts. In the first quarter of FY 2006 actual expenditures are lower than budgeted due to two vacant, federal funded, temporary positions (Bioter Clk Typist, Public Health Educator IV), two vacant general funded positions (State EMS Medical Director, Oahu EMS Physician) and four permanent employees incurring periods of leave without pay. In addition, funds encumbered in the first quarter for annual ambulance service contracts will not be fully expended until the end of the year and other funds requested for encumbrance in contracts will not incur expenditure until the contracts are executed.

Part II – MEASURES OF EFFECTIVENESS

1. – 5. Ambulance response time measures are always variable due to the number of responses within each geographic area, especially rural areas. The variances are within normal limits with services over-all exceeding response time standards due to increased call volume on the island of Oahu.
6. A change in billing contractors in January 2005 has resulted in a higher collection rate for the period ending June 30, 2005.

9. Decrease in seat belt use due to fewer parents and caregivers receiving direct education about car seats from installation stations and community car seat checkups. Also, publicity efforts have focused on seatbelt use, such as the statewide click-it-or-ticket campaigns, not car seat use.

Part III – PROGRAM TARGET GROUPS

3. The increase is likely due to the increase in driving population and motor vehicle accidents.

Part IV – PROGRAM ACTIVITIES

4. The increase in number of patient billed is due to an increase in service call volume.
10. Decrease in statewide publicity to promote child passenger safety. State and community efforts focused on promotion of seatbelt use.

STATE OF HAWAII

PROGRAM TITLE:

DEVELOPMENTAL DISABILITIES

PROGRAM-ID:

HTH - 501PROGRAM STRUCTURE NO: **050104****VARIANCE REPORT**

REPORT V61

11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	±	CHANGE	%	BUDGETED	ACTUAL	±	CHANGE	%	BUDGETED	ESTIMATED	±	CHANGE	%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
						FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
						PLANNED	ACTUAL	±	CHANGE	%	PLANNED	ESTIMATED	±	CHANGE	%
PART II: MEASURES OF EFFECTIVENESS															
1. % OF PEOPLE RECEIVING DEV DISABLED SERVICES						30	29	-	1	3	30	32	+	2	7
2. # PERSONS W/DD REMAING IN INSTIT (SMALL ICF/MR)						78	88	+	10	13	71	81	+	10	14
3. # ADULTS LIVING IN THEIR OWN HOME						109	116	+	7	6	111	120	+	9	8
4. # PERSONS W/DEV DISAB IN PAID EMPLOYMENT						145	144	-	1	1	160	160			
5. % OF PERSONS WITH NEUROTRAUMA RECEIVING SUPPORTS						8	8				18	20	+	2	11
PART III: PROGRAM TARGET GROUP															
1. # OF PERSONS IN NEED OF DD SERVICES						11,181	11,181				11,181	11,181			
2. # OF PEOPLE IN NEED OF NEUROTRAUMA SERVICES						4,000	4,000				4,000	4,000			
PART IV: PROGRAM ACTIVITIES															
1. # PERSONS RECEIVING DD/MR COMMUNITY SUPPORTS						3,307	3,283	-	24	1	3,399	3,499	+	100	3
2. # PERSONS RECVG HCBS DD/MR WAIVERED SERVICES						2,137	2,142	+	5		2,287	2,442	+	155	7
3. #WAITLISTED PERSONS ADMITTED TO HCBS-DD.MR WAIVER						150	223	+	73	49	150	230	+	80	53
4. # RESIDENTIAL CAREGIVERS CERTIFIED/RECERTIFIED						620	642	+	22	4	679	679			
5. # FAMILY MEMBERS,CAREGIVERS,PROVIDERS & STAFF TRND						1,148	1,251	+	103	9	1,449	1,449			
6. # ADULTS LIVING IN THEIR OWN HOME						106	116	+	10	9	111	120	+	9	8
7. # PERSONS W/DEV DISABILITIES EARNING INCOME						152	156	+	4	3	160	160			
8. # INFORMATION/REFERRAL & OUTREACH ACTIVITIES						4,319	2,412	-	1,907	44	4,535	2,800	-	1,735	38
9. #ADVRS EVNT REPTS RECVD RE AB/NEGL,INJUR,HTH CONC						245	368	+	123	50	325	325			

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 04
HTH 501

PROGRAM TITLE: Developmental Disabilities

Part I – EXPENDITURES AND POSITIONS

Vacancies in Developmental Disabilities Division are still pending awaiting the Division's reorganization. New functions in the Case Management & Information Services Branch, Developmental Disabilities Services Branch, and Division Administration will determine changes in various positions.

Expenditures increased over budget in the first quarter FY 06 due to the Developmental Disabilities Division's new billing system requiring the Division at the present time, to pay providers with 100% General Funds to be subsequently reimbursed with federal funds in the remaining quarters.

Part II – MEASURES OF EFFECTIVENESS

Item #2 – An initial reduction in the number of providers for ICF/MRs was offset by one provider converting DD Domiciliary Homes into ICF/MRs, thereby increasing their ICF/MR beds from the original 15 to 35 beds at the end of FY 05.

Item #5 – A project is planned for this FY using Neurotrauma special funds will increase the number of individuals with Neurotrauma served.

Part III – PROGRAM TARGET GROUPS

No change.

Part IV – PROGRAM ACTIVITIES

Item # 3: Due to the Makin II suit, more individuals with developmental disabilities requested admission into the DD/MR Waiver. A greater number of admissions were granted into the Waiver after DDD received more matching funds through an emergency appropriation.

Item #8: There was decrease in the number of information and referral requests.

Item #9: The number reflects a decrease in the reportable threshold to encourage reporting of data by agencies.

STATE OF HAWAII
PROGRAM TITLE:

FAMILY HEALTH

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: 050105

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	321.8	282.8	-	39.0	12	320.8	280.8	-	40.0	12	320.8	320.8
EXPENDITURES	68,988	67,249	-	1,739	3	34,121	25,184	-	8,937	26	35,515	45,616
											10,101	28
TOTAL COSTS												
POSITIONS	321.8	282.8	-	39.0	12	320.8	280.8	-	40.0	12	320.8	320.8
EXPENDITURES	68,988	67,249	-	1,739	3	34,121	25,184	-	8,937	26	35,515	45,616
											10,101	28
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. DEGREE TO WHICH MCH PERFORMS 10 ESSEN HTH FTNS	NA	NA							NA	NA		
2. %WOMEN GIVG BIRTH % RECD PRENATAL CARE IN 1ST 3MO	43.7	49	+	5	11	43.7	49	+	5	11		
3. %LIVE BIRTHS SCREEND FOR NEWBORN METAB/OTH DISORD	99	99.7				99	99.7					
4. % ELIG PREG WOMEN, INF & CHDRN RECVG WIC SERVICES	83	81	-	2	2	83	81	-	2	2		
5. %UNINS INDIV RECV SUBSD PRIM CARE HTH SVS THRU POS	NA	NA				NA	NA					
6. %IND RECV FAM PLNG,VIOI,SEX ASSLT PREV ED THRU POS	NA	NA				NA	NA					
7. %POS-SVD AT-RISK FAM,NO CONF REPTS OF CHLD AB/NEGL	96	97	+	1	1	96	97	+	1	1		
8. %SCH-AGE CHDRN REC ASSMT/EARLY ID FOR AT-RISK BEH	2	NA				56	NA					
9. %CHDN 0-3 DEV DELAYED IN EI RECVG SVS IDEN IN IFSP	NA	NA				NA	NA					

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII
PROGRAM TITLE:
PROGRAM-ID:
PROGRAM STRUCTURE NO:

VARIANCE REPORT
CHILDREN WITH SPECIAL HEALTH NEEDS
HTH - 530
05010501

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	163.8	149.8	-	14.0	9	164.8	142.8	-	22.0	13	164.8	164.8
EXPENDITURES	15,014	15,883		869	6	8,193	8,146	-	47	1	7,350	8,533
											1,183	16
TOTAL COSTS												
POSITIONS	163.8	149.8	-	14.0	9	164.8	142.8	-	22.0	13	164.8	164.8
EXPENDITURES	15,014	15,883		869	6	8,193	8,146	-	47	1	7,350	8,533
											1,183	16
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. %CHDRN (CSHCN)AGE 0-21 WHO HAVE A MEDICAL HOME	92	90	-	2	2	92	92					
2. % CSHCN AGE 0-21 YEARS WHO HAVE HEALTH INSURANCE	92	90	-	2	2	92	92					
3. %CHDRN 0-15 ELIG SSI, PROV OUTRCH FOR UNMT HTH NDS	99	97	-	2	2	99	99					
4. % NEWBORNS SCREENED FOR METAB, OTHER DISORDERS	99	99.7				99	99.7					
5. % NEWBORNS SCREENED FOR HEARING LOSS	98	98.8				98	99	+	1	1		
6. %INF W/PERM HEARG LOSS REFF TO EARLY INTRYNTN SVS	95	83.1	-	11	12	95	85	-	10	11		
7. RATE OF BIRTH DEFECTS PER 10,000 LIVE BIRTHS	400	437	+	37	9	500	475	-	25	5		
8. %CHDRN DD/BIOL/ENV AT RISK IN EI, RECV EI IN IFSP	8	7.3				8	8					
PART III: PROGRAM TARGET GROUP												
1. # CSHCN AGE 0-21 REQ +HTH/REL SVCS THAN MOST	32,000	32,000				32,000	32,000					
2. # CSHCN 0-15 W/FUNCTIONAL LIMITATIONS RCYNG SSI	1,180	1,200	+	20	2	1,200	1,200					
3. # OF LIVE BIRTHS	16,725	18,291	+	1,566	9	17,250	18,500	+	1,250	7		
4. # PERSONS IN STATE W/OR AT RISK FOR GENETIC DISORD	1,200,000	1,200,000				1,200,000	1,200,000					
5. # CHDRN 0-3 W/DEVEL DELAY, BIOL/ENVIRON AT RISK	3,975	3,936	-	39	1	4,000	4,000					
6. #CHDRN 3-5 SCRND FOR DEV, LEARN, & BEHAV CONCERNS	50,000	50,000				50,000	50,000					
PART IV: PROGRAM ACTIVITIES												
1. #I CSHCN 0-21 REC SVS OTHERWISE NOT ACCESS/AFFDBLE	1,350	1,350				1,350	1,350					
2. #CSHCN 0-15 MED ELIG SSI & PROVIDED OUTREACH/SCRNG	450	440	-	10	2	450	450					
3. # INFANTS IDENTIFIED W/METAB/OTHER DISORDERS	590	671	+	81	14	590	700	+	110	19		
4. #INFANTS IDENTIFIED W/HEARNG LOSS THRU NEWBN SCRNG	76	65	-	11	14	76	65	-	11	14		
5. # INF W/PERM HRG LOSS REFF FOR EARLY INTERVN SVS	72	54	-	18	25	72	55	-	17	24		
6. # CHDRN 0-3 W/DEV DELAYS REC EARLY INTERVNTN SVS	1,700	2,389	+	689	41	2,000	2,400	+	400	20		
7. #CHDRN 0-3 DEV DEL& 0-21 CHRON ILL REC RESPITE SVS	300	304	+	4	1	300	300					
8. #CHDRN 0-1 DIAG W/MOD-SEVERE BIRTH DEFECT	740	730	-	10	1	740	740					
9. # CHDRN 3-5 SCRND FOR DEVEL/LEARN/BEHAV CONCERNS	1,975	2,000	+	25	1	1,975	1,975					

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 05 01
HTH 530

PROGRAM TITLE: Children with Special Health Needs

Part I – EXPENDITURES AND POSITIONS

The variance in expenditures for FY 05 was due to increased costs of providing early intervention services as mandated by the Felix Consent Decree. The variance in position counts for the 1st Quarter of FY 06 was due to 22 permanent position vacancies in CSHNB programs. The variance in expenditures for the 2nd, 3rd, and 4th Quarters of FY 06 is primarily due to the collective bargaining (C/B) amount (\$150,321) allocated/authorized to the program and the additional federal funds amount (\$1,032,000) authorized to expend by the Governor.

Part II – MEASURES OF EFFECTIVENESS

Item 6. This item assumes that all children diagnosed with a hearing loss have a need for early intervention. This is not necessarily true, as those with a unilateral hearing loss generally have adequate hearing for speech/language development and do not require early intervention prior to 6 months. Of the 65 with a confirmed hearing loss, 54 (83 %) received early intervention services. The other children did not receive early intervention services for a variety of reasons. Some were diagnosed with a unilateral hearing loss and did not require early intervention, while others had a conductive hearing loss that required medical intervention first. Whether these children will require early intervention services in the future cannot be determined at this time.

Part III – PROGRAM TARGET GROUPS – N/A

Part IV – PROGRAM ACTIVITIES

Item 3. This increase in the number of infants identified with metabolic and other disorders was due to the increase in the number of conditions being screened for from seven (7) to thirty-one (31).

Item 4. See Part II, Item 6 comments.

Item 5. See Part II, Item 6 comments.

Item 6. This count is based on the 12/1/04 federal child count, a one day count of the number of children receiving services based on an IFSP. It does not include all children under 3 who received services over a 12 month period.

STATE OF HAWAII
PROGRAM TITLE:

VARIANCE REPORT

WOMEN, INFANTS & CHILDREN SERVICES

REPORT V61
11/22/05

PROGRAM-ID: HTH - 540

PROGRAM STRUCTURE NO: 05010502

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
	116.5	98.5	-	18.0	15	115.5	97.5	-	18.0	16	115.5	115.5			
	29,660	28,999	-	661	2	6,914	6,800	-	114	2	22,746	22,860		114	1
	116.5	98.5	-	18.0	15	115.5	97.5	-	18.0	16	115.5	115.5			
	29,660	28,999	-	661	2	6,914	6,800	-	114	2	22,746	22,860		114	1
						FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
						PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%
PART II: MEASURES OF EFFECTIVENESS															
1. % ELIG PREG WOMEN, INFANTS & CHILDREN SERVED						83	81	-	2	2	83	83			
2. % OF IDEN OVERWEIGHT WOMEN & CHDN >=2 COUNSELD						100	100				100	100			
3. % OF WIC WOMEN WHO INITIATE BREASTFEEDING						85	80	-	5	6	85	85			
PART III: PROGRAM TARGET GROUP															
1. # ELIG PREG, POST-PARTUM & BREASTFEEDG WOMEN						9,000	9,500	+	500	6	9,000	9,000			
2. # ELIGIBLE INFANTS UP TO 12 MONTHS OF AGE						10,000	9,500	-	500	5	8,000	9,000	+	1,000	13
3. NUMBER OF ELIGIBLE CHILDREN UP TO AGE 5						22,000	24,200	+	2,200	10	27,000	27,000			
PART IV: PROGRAM ACTIVITIES															
1. # CHECKS FOR SUPPL FOODS ISSUED TO PARTICIPANTS						1,080,000	1,071,351	-	8,649	1	1,080,000	1,080,000			
2. #NUTR ED/COUN SESS TO WIC WOMEN, CHDN >=2 O/W FTR						13,700	16,752	+	3,052	22	13,700	16,752	+	3,052	22
3. #PRENATAL BRSTFDG INFO CONTACTS PROV TO WIC WOMEN						4,900	3,215	-	1,685	34	4,900	3,400	-	1,500	31

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 05 02
HTH 540

PROGRAM TITLE: Women, Infants & Children Services

Part I – EXPENDITURES AND POSITIONS

(A03) Some vacant permanent positions were not filled due to future restructuring.

(A04, A08) Actual expenditures for FY04-FY05 and FY05-FY06 1st quarter were less than budgeted. Indirect costs for the period from 10/01/04 to 09/30/05 are not reflected in FAMIS reported actual expenditures yet. This resulted in lower expenditures than budgeted.

(A12) In FY05-FY06 3 quarters ending 6/30/06 expenditures are expected to increase for food costs and operating costs to the extent of the federal grant award from USDA.

Part II – MEASURES OF EFFECTIVENESS

No significant variance.

Part III – PROGRAM TARGET GROUPS

2. Current data indicates an expected increase in the number of eligible infants in FY05-FY06.
3. Current data indicates an increase in the number of eligible children to age 5 in FY04-FY05.

Part IV – PROGRAM ACTIVITIES

2. Current data indicates more WIC women and children ≥ 2 are overweight in FY04-FY05 and that the increase is expected to continue in FY05-FY06.
3. The number of prenatal breastfeeding contacts provided to WIC women was less due to lower numbers of pregnant women enrolling than expected.

STATE OF HAWAII

PROGRAM TITLE:

PROGRAM-ID:

PROGRAM STRUCTURE NO: 05010503

MATERNAL AND CHILD HEALTH SERVICES

HTH - 550

VARIANCE REPORT

REPORT V61

11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	±	CHANGE	%	BUDGETED	ACTUAL	±	CHANGE	%	BUDGETED	ESTIMATED	±	CHANGE	%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06						
					PLANNED	ACTUAL	±	CHANGE	%	PLANNED	ESTIMATED	±	CHANGE	%	
PART II: MEASURES OF EFFECTIVENESS															
1. %NDIV 14-44 RECVG DOH-SUBSIDZD FAM PLNG CLIN SVS															
2. % POS WMN GIVG BIRTH & REC'D PRENTL CARE 1ST TRIM															
3. %PREG WOM REFF FOR SUBST AB ASSMT/TRTMT THRU POS															
4. % VERY LOW BIRTH WEIGHT INFANTS IN POS															
5. %UNINS INDIV REC SUBSID PRIM CARE HTH SVS THRU POS															
6. % PARENTS REC POS ERLY CHLDHD PARNT ED & SPPT SVS															
7. % INDIV REC SEX ASSLT & VIOLNCE PREV ED THRU POS															
8. %AT RISK FAM POS-SVD W/O CONFRM REPTS OF ABUS/NEGL															
PART III: PROGRAM TARGET GROUP															
1. # INDIV 14-44 NEEDG FAMILY PLANNING SERVICES															
2. #PREG WOMEN SERVED IN POS CONTRACTS W/LIVE BIRTHS															
3. # OF UNINSURED INDIVIDUALS															
4. # CHILDREN AGED 0 TO 4 YEARS															
5. # SCHOOL-AGED CHILDREN, ADOLESCENTS															
6. # NON-MILITARY FAMILIES OF NEWBORNS															
PART IV: PROGRAM ACTIVITIES															
1. # INDIV REC DOH SUBSIDIZED FP VISITS (POS)															
2. #PREG WOM RCVG PERINTL SPPT SVS 1ST TRIM THRU POS															
3. #PREG WOM ID AT SA RISK RECVG SVCS THRU POS															
4. #VERY LOW BRTH WGT INFTS RCV PERINTL SPPT THRU POS															
5. #PARTIC IN EARLY CHLDHD PARENT ED/SPPT SVS															
6. #INDIV RCVD PRIMARY CARE SUBSID SVS THRU POS															
7. #INDIV RCV FAMILY PLNG, VIOL, SEX ASSLT PREV EDUC															

VARIANCE REPORT NARRATIVE
FY 2005 and FY 2006

05 01 05 03
HTH 550

PROGRAM TITLE: Maternal and Child Health Services

Part I – EXPENDITURES AND POSITIONS

The FY 2005 personnel variance is due to delaying in recruitment and hiring of positions. However decreased expenditures in FY 2005 were due to the transfer of \$600,000 from Healthy Start general fund appropriation to HTH 530 to cover the deficit and the delay in execution of POS contracts for the federal funded Healthy Start Disparities, and Women's Health Depression grants. In the first quarter of FY 2006, the expenditures were lower than the budgeted amount due to the delay in execution of purchase of services (POS) contracts. This will result in increased expenditures in the last three quarters.

Part II – MEASURES OF EFFECTIVENESS

1. The higher percentage is due to a change in the definition of a Family Planning visit that resulted in more visits counted.
2. The higher percentage is due to the redefinition of the target group. The projected number was based on actual statewide births. In FY 2005, the target group number is based on the number of Perinatal POS pregnant women who delivered a live infant.
3. The increased number is due to a change in the definition to include pos pregnant women at risk for substance abuse.
7. The variance is due to a decreased number of participating schools for sex assault and violence prevention education in the public schools which resulted in fewer people contacted. Contract provider's staff turnover also contributed to fewer student contacts.

Part III – PROGRAM TARGET GROUPS

2. The variance is due to the redefinition of target group from the statewide number of pregnant women to the number of Perinatal Care POS pregnant women that delivered a live infant in the fiscal year 2005.
4. The actual number of 78,163 is to reflect the new target group for children ages 0 through 4.
6. New target group, no planned figure.

Part IV – PROGRAM ACTIVITIES

2. The variance is due to a redefinition of the program activities from counting all clients who were enrolled in a Perinatal POS to counting only clients who were enrolled in the Perinatal POS in the first trimester of their pregnancy.
3. The variance is due to POS providers admitting increased number of the high risk clients.
4. The variance is due to a redefinition of the program activities from counting all normal birth weight infants statewide to counting Perinatal POS clients who gave birth to a very low birth weight infant.
6. New activity measure, no planned figure.
7. Increase in the number of individuals is due to the redefinition of the target group to include family planning, violence prevention and sexual assault education clients.

STATE OF HAWAII

PROGRAM TITLE:

COMMUNITY HEALTH

VARIANCE REPORT

REPORT V61

11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: 050106

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	462.8	433.8	-	29.0	6	479.0	439.0	-	40.0	8	479.0	479.0
EXPENDITURES	18,964	19,170	206	1	5,866	5,380	-	486	8	14,489	15,518	1,029 7
TOTAL COSTS												
POSITIONS	462.8	433.8	-	29.0	6	479.0	439.0	-	40.0	8	479.0	479.0
EXPENDITURES	18,964	19,170	206	1	5,866	5,380	-	486	8	14,489	15,518	1,029 7
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. %ADULTS W/DIAB OR ASTHMA RCVD FLU SHOT IN PAST YR					54	59	+	5	9	55	55	
2. % OF PUBLIC SCH STDTS W/COMPLETED IMMUNZ LEVEL					98	98				98	98	
3. % CONSUMING 5/MORE SERVGS OF FRUITS, VEG/DAY					24	34	+	10	42	23	33	+
4. % EXERCISING 20 MIN/DAY AT LEAST 3 TIMES/WEEK					53	56	+	3	6	18	56	+
5. % OF YOUTH SMOKERS IN 9-12 GRADE					15	NA				8	NA	10 43
6. % OF ADULTS WHO ARE SMOKERS					17	NA				20	NA	38 211

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII
PROGRAM TITLE:

CHRONIC DISEASE MANAGEMENT & CONTROL

PROGRAM-ID:

HTH - 180

PROGRAM STRUCTURE NO: **05010601**

VARIANCE REPORT

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	19.8	17.8	-	2.0	10	30.0	24.0	-	6.0	20	30.0	30.0
EXPENDITURES	4,438	4,129	-	309	7	1,627	1,356	-	271	17	2,781	3,083
											302	11
TOTAL COSTS												
POSITIONS	19.8	17.8	-	2.0	10	30.0	24.0	-	6.0	20	30.0	30.0
EXPENDITURES	4,438	4,129	-	309	7	1,627	1,356	-	271	17	2,781	3,083
											302	11
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % ADULTS EATING 5/MORE SERVGS OF FRUITS/VEG PER DAY		24	34	+	10	42	26	33	+	7	27	
2. %ADULTS EXERCISING 20 MIN/DAY, AT LEAST 3 TIMES/MK		53	56	+	3	6	55	56	+	1	2	
3. %ADULTS W/DIABETES WHO CHECK BLOOD GLUCOSE DAILY		53	46	-	7	13	54	54				
4. %ADULTS W/DIAB OR ASTHMA RCVD FLU SHOT IN PAST YR		54	59	+	5	9	55	55				
5. PER CAPITA CONSUMPTION OF CIGARETTES		NA	NA				NA	NA				
6. %WOMEN SERVD IN BCCCP OF TOTAL PROJ TO BE SERVED		100	112	+	12	12	100	100				
PART III: PROGRAM TARGET GROUP												
1. ADULTS WITH DIABETES		77,000	66,000	-	11,000	14	79,000	79,000				
2. ADULTS WITH ASTHMA		61,000	80,000	+	19,000	31	60,000	60,000				
3. SEDENTARY ADULTS		15	14	-	1	7	14	14				
4. OVERWEIGHT ADULTS		50	53	+	3	6	47	50	+	3	6	
5. SMOKERS IN GRADES 9 - 12		14.7	15				14.5	15				
6. ADULT SMOKERS		17	17				16.8	17				
7. UNINSURED/UNDERINSURED WOMEN ENROLLED IN BCCCP		100	100				100	100				
PART IV: PROGRAM ACTIVITIES												
1. #SESS TO IMPL STDS/GUIDES FOR CHRN DIS PREV,MGT		67	82	+	15	22	48	58	+	10	21	
2. #TRND IN STD PHYS ACT/NUTR/TOB/DIAB/ASTH/CANCER		1,750	1,430	-	320	18	2,025	1,495	-	530	26	
3. #CULT APPROP ED/INFO MAT/PUBL/CURRICULA DEV/REVSD		32	7	-	25	78	29	29				
4. #POLICIES/LEGISLATION SUPPORTED AND/OR PASSED		11	14	+	3	27	9	10	+	1	11	
5. #WOMEN RECEIVG MAMMO/PAP TESTS THRU BCCCP		1,000	1,125	+	125	13	1,000	1,100	+	100	10	
6. #HI-RISK, LIMITED ENGLISH-SPKG INDIVIDUALS SERVED		3,500	3,572	+	72	2	3,500	3,500				

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

PROGRAM TITLE: Chronic Disease Management and Control

05 01 06 01
HTH 180

Part I – EXPENDITURES AND POSITIONS

- FY 2005 There were six vacant positions on 6/30/05 due to reorganizations and slow responses to recruitment efforts. The net expenditure variance was due to planned contracts for which funds had not been encumbered because of pending contract modifications.
- FY 2006 The net expenditure variance in the first quarter is primarily due to the ongoing difficulty in recruiting and filling vacant positions.
- The net expenditure variance in the last three quarters is primarily due to collective bargaining augmentation.

Part II – MEASURES OF EFFECTIVENESS

1. In FY 05 & 06, the percent of adults eating 5 or more fruits and vegetables per day increased significantly from 24%, according to the Behavior Risk Factor Surveillance System (BRFSS), to 34%. For the past five years, BRFSS has fluctuated between 20.4% and 33.7%. The increase in the percent of adults eating 5 or more fruits and vegetables per day is a promising indicator of the success of targeted efforts to motivate adults to increase their daily consumption of fruits and vegetables.
3. In FY 05 & 06 measures of effectiveness are based on BRFSS. Questionable 2004 BRFSS numbers reflected are a result of an unusually small sample size therefore, increasing the margin of error. The program will reexamine 2005 BRFSS data drawn from a larger sample size with smaller margins of error. This will allow programs to make more accurate projections.
5. In FY 05 & 06, it was anticipated that the program would be able to provide an “actual” measure of effectiveness. However, due to limitations and discrepancies in the two primary data sources currently available, the program is not able to provide an accurate measure. The program will be

- including questions in the 2005 Adult Tobacco Survey, which will provide more accurate & current information on cigarette consumption. The data is anticipated to be available in 2006.
6. In FY 05, the increase in percent of women served is due to the program strengthening its recognition as a valuable programmatic part of the community health care system, and becoming more widely acknowledged and accepted. In FY 04 & 05 additional funding was available for providers to serve a greater number of women.

Part III – PROGRAM TARGET GROUPS

- 1.&2. These figures are based on questionable Behavior Risk Factor Surveillance System (BRFSS) percentages in FY 05, which are the result of unusually small sample sizes in the respective target groups for that period. Small sample sizes increase the margin of error and may skew figures up or down. The program will reexamine FY 06 BRFSS data drawn from a larger sample size with smaller margins of error. This will allow programs to make more accurate projections.

Part IV – PROGRAM ACTIVITIES

- 1.,2.,3.&4. In FY 05, the decrease is due to the loss of funding of all nutrition and physical activity positions. Consequently, there was a significant reduction in program activities related to chronic disease prevention and disease management.
5. In FY 05, the increase in the number of women served is due to the program strengthening its recognition as a valuable programmatic part of the community health care system, and becoming more widely acknowledged and accepted. In FY 05 & 06 additional funding was available for providers to serve a greater number of women.

STATE OF HAWAII
PROGRAM TITLE:

PUBLIC HEALTH NURSING

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: **HTH - 570**

PROGRAM STRUCTURE NO: **05010602**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
PART II: MEASURES OF EFFECTIVENESS															
1. %CHDRN 0-18 W/HTH INSURAMCE MONITORED BY PH															
2. %SP NDS CHDN 0-3 (PHN MONIT) W/IFSP W/IN 45 DAYS															
3. IMUN LVL COMP OF CHDN AGE 2 AS % MONITORD BY PHN'S															
4. %FRAIL ELDRLY MONITD BY PHN & MAINTAIND IN COMMNTY															
5. % STUDENTS IN PUBLIC SCHLS W/ COMPLETED IMMUNZTNS															
6. %STDTS W/DIAB IN PUBLIC SCHLS W/EAP DEVELOPED															
PART III: PROGRAM TARGET GROUP															
1. MATERNITY CASES NEEDING PHN SERVICES, STATEWIDE															
2. SPEC NEEDS INFANTS/CHDRN 0-3 NEEDG PHN SVS, STWD															
3. NON-SN INF & CHDRN 0-18 NEEDG PHN SVS, STATEWD															
4. SN & DD CHDRN 4-20 NEEDING PHN SVS, STATEWIDE															
5. ADULTS W/CHRONIC DISEASES NEEDING PHN SVS, STWD															
6. CHLD & ELDLY ABUSE/NEGL CASES NEEDG PHN SV, STWD															
7. DIAG/SUSP TB CASES, CONTCTS & SCRNG NEEDG PHN															
8. HANS D/HIV/HEP/OTH CASES NEEDG PHN SVS, STATEWIDE															
9. SPEC ND STDTS IN PUB SCH NEEDG SN SVS, STATEWIDE															
10. STUDENTS ENTERING PUBLIC SCHOOLS, STATEWIDE															
PART IV: PROGRAM ACTIVITIES															
1. HI-RSK MATERN CASEFINDG/SUPERVSN/CARE COORD VISITS															
2. INFANT & PRESCHOOL CHLDN SUP, MGT & IMMUN VISITS															
3. SCHOOL AGE CHILDREN HEALTH INSTR SUP VISITS															
4. ADULT & ELDERLY HTH ASSMT, REFRR, FOLLOW UP VSTS															
5. CHLD/ELD ABUSE/NEGL ID, SUPERVSN PREVENTN VISITS															
6. TB SCREENG, INVESTGN, TREATMT, FOLLOW UP VISITS															
7. HANSEN'S, HIV, HEP & OTH CD INV, TRTMT & FLW-UP															
8. CARE COORD OF SPEC NEEDS & DD CHILDREN VISITS															
9. SN CARE VISITS TO SPEC NEED STDTS IN PUBLIC SCHLS															
10. PUBLIC SCHOOL STUDENT VISITS TO HEALTH ROOM															

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 01 06 02
HTH 570

PROGRAM TITLE: Public Health Nursing

Part I – EXPENDITURES AND POSITIONS

FY 05 the net expenditure variance is due to collective bargaining augmentation.

FY 06, the net expenditure variance in the last three quarters is due to collective bargaining augmentation.

Part II – MEASURES OF EFFECTIVENESS

2. In FY05, the decrease was due to changes with the Individualized Family Service Plan (IFSP) form and processes; limited resources to complete the comprehensive evaluation; change in policy that all infants and toddlers at biologic risk get a comprehensive evaluation prior to the development of the IFSP.

Part III – PROGRAM TARGET GROUPS

1. In FY05 & 06, the decrease is due to the increased focus in prioritizing resources to infants and toddlers due to non-compliance with IDEA, Part C and attention to development of Emergency Action Plans for students in public schools.
5. In FY 05 & 06, the increase is due to referrals for assessment and follow-up services for frail elderly; also some of the students with chronic conditions may be included in this indicator, which needs to be corrected.

Part IV – PROGRAM ACTIVITIES

1. In FY 05, the decrease of activities is due to decreased referrals and prioritization of resources to high risk infants and toddlers to meet compliance with IDEA, Part C.
3. In FY 05, the increase is due to focus on development of Emergency Action Plans for students with medical conditions; consultation to DOE and training of DOE staff.
4. In FY 05 & 06, the increase is due to the increased referrals for assessment services, linkages with other community resources for services, caregive support in maintaining the elderly in the community.

STATE OF HAWAII

PROGRAM TITLE:

HEALTH RESOURCES ADMINISTRATION

VARIANCE REPORT

REPORT V61

11/22/05

PROGRAM-ID:

HTH - 595

PROGRAM STRUCTURE NO: 050107

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	35.5	33.5	-	2.0	6	37.5	34.5	-	3.0	8	37.5	37.5
EXPENDITURES	57,192	57,637	445	1	10,774	6,151	-	4,623	43	43,835	48,713	4,878 11
TOTAL COSTS												
POSITIONS	35.5	33.5	-	2.0	6	37.5	34.5	-	3.0	8	37.5	37.5
EXPENDITURES	57,192	57,637	445	1	10,774	6,151	-	4,623	43	43,835	48,713	4,878 11
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % MOE HRA PRGS SHOWING BENEFICIAL CHGS (PL VS ACT)					57	52	-	5	9	50	50	
PART III: PROGRAM TARGET GROUP												
1. PERSONNEL IN HEALTH RESOURCES ADMINISTRATION					1,282	1,270	-	12	1	1,282	1,270	- 12 1
2. OTHER ADMIN LEVEL STAFF IN DOH					176	170	-	6	3	176	170	- 6 3

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

PROGRAM TITLE: HEALTH RESOURCES ADMINISTRATION

05 01 07
HTH 595

Part I – EXPENDITURES AND POSITIONS

FY 05. Position variance is due to vacancies.

FY 06. Expenditure variance due to vacancies. Expenditure variance is due to delays in implementing Purchase of Service contracts in the first quarter. Variance in last 3 quarters due to collective bargaining augmentation.

Part II – MEASURES OF EFFECTIVENESS

No significant variance.

PART III – PROGRAM TARGET GROUP

No significant variance.

PART IV - PROGRAM ACTIVITIES

None

STATE OF HAWAII
PROGRAM TITLE:

HOSPITAL CARE

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: **0502**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	2,836.3		- 2,836.3	100	2,836.3	- 2,836.3	100	100	2,836.3		- 2,836.3	100
EXPENDITURES	353,486	333,392	- 20,094	6	88,524	- 88,524	100	100	278,200	274,315	- 3,885	1
TOTAL COSTS												
POSITIONS	2,836.3		- 2,836.3	100	2,836.3	- 2,836.3	100	100	2,836.3		- 2,836.3	100
EXPENDITURES	353,486	333,392	- 20,094	6	88,524	- 88,524	100	100	278,200	274,315	- 3,885	1
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. OCCUPANCY RATE - ACUTE CARE					67.38	65.99	- 1	1	67.21	64.43	- 2	3
2. OCCUPANCY RATE - LONG-TERM CARE					96.29	94.75	- 1	1	96.8	95.77	- 1	1
3. AVERAGE LENGTH OF STAY - ACUTE CARE					5.07	4.73			5.01	4.63		
4. AVERAGE LENGTH OF STAY - LONG TERM CARE					193.89	159.15	- 34	18	192.94	159.45	- 33	17

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII

PROGRAM TITLE:

VARIANCE REPORT

REPORT V61

11/22/05

PROGRAM-ID:

HTH - 210

PROGRAM STRUCTURE NO: 050201

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	2,836.3		- 2,836.3	100	2,836.3		- 2,836.3	100	2,836.3		- 2,836.3	100
EXPENDITURES	353,486	333,392	- 20,094	6	88,524		- 88,524	100	278,200	274,315	- 3,885	1
TOTAL COSTS												
POSITIONS	2,836.3		- 2,836.3	100	2,836.3		- 2,836.3	100	2,836.3		- 2,836.3	100
EXPENDITURES	353,486	333,392	- 20,094	6	88,524		- 88,524	100	278,200	274,315	- 3,885	1
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. OCCUPANCY RATE - ACUTE CARE					67.38	65.99	- 1	1	67.21	64.43	- 2	3
2. OCCUPANCY RATE - LONG-TERM CARE					96.29	94.75	- 1	1	96.8	95.77	- 1	1
3. AVERAGE LENGTH OF STAY - ACUTE CARE (DAYS)					5.07	4.73			5.01	4.63		
4. AVERAGE LENGTH OF STAY - LONG-TERM CARE (DAYS)					193.89	159.15	- 34	18	192.94	159.45	- 33	17
5. AVER OPER COST PER PATIENT DAY (EXCL EQPT)(\$)					893.86	884.52	- 9	1	936.6	921.25	- 15	2
6. AVG PATIENT REVENUE PER PATIENT DAY (\$)					796.72	794.16	- 2		814.86	792.40	- 22	3
PART III: PROGRAM TARGET GROUP												
1. ESTIMATED POPULATION OF SERVICE AREA					441,700	454,799	+ 13,099	3	448,972	454,799	+ 5,827	1
2. ESTIMATED POPULATION OF SERVICE AREA OVER AGE 65					171,050	169,346	- 1,704	1	174,658	174,658		
PART IV: PROGRAM ACTIVITIES												
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE					22,347	22,406	+ 59		22,570	22,362	- 208	1
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE					113,376	105,976	- 7,400	7	113,083	103,477	- 9,606	8
3. NUMBER OF BIRTHS					3,379	3,348	- 31	1	3,413	3,318	- 95	3
4. NUMBER OF ADMISSIONS - LONG-TERM CARE					1,461	1,797	+ 336	23	1,476	1,813	+ 337	23
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE					283,275	285,999	+ 2,724	1	284,781	289,090	+ 4,309	2

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 02 01
HTH 210

PROGRAM TITLE: Hawaii Health Systems Corporation

PART I EXPENDITURES AND POSITIONS

The variance in expenditure can be attributed to the collective bargaining allocation. Also, please note that the expenditures are based on accrual accounting.

PART II MEASURES OF EFFECTIVENESS

Item 4. The variance can be attributed to the conversion of acute beds at Maui Memorial Medical Center to long-term care beds.

PART III PROGRAM TARGET GROUP

No variances.

PART IV PROGRAM ACTIVITIES

Item 5. See Part II, item 4.

STATE OF HAWAII

PROGRAM TITLE:

BEHAVIORAL HEALTH

VARIANCE REPORT

REPORT V61

11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: 0503

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	1,082.0	880.0	- 202.0	19	1,084.5	896.5	- 188.0	17	1,084.5	974.0	- 110.5	10
EXPENDITURES	206,605	209,710	3,105	2	96,839	89,630	- 7,209	7	129,562	138,330	8,768	7
TOTAL COSTS												
POSITIONS	1,082.0	880.0	- 202.0	19	1,084.5	896.5	- 188.0	17	1,084.5	974.0	- 110.5	10
EXPENDITURES	206,605	209,710	3,105	2	96,839	89,630	- 7,209	7	129,562	138,330	8,768	7
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % CONSUMERS SERVED AT HIGH INTENSITY FUNCTNL LVL					7	7			7	7		
2. % CLIENTS COMPLETING ALCOHOL & DRUG ABUSE TRTMT					43	43			49	45	- 4	8
3. % PURCHASE OF SERVICE PROGRAMS MONITORED					100	100			100	100		

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII

PROGRAM TITLE:

PROGRAM-ID:

PROGRAM STRUCTURE NO: 050301

ADULT MENTAL HEALTH - OUTPATIENT**HTH - 420****VARIANCE REPORT**

REPORT V61

11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS	192.5	161.0	-	31.5	16	200.5	169.5	-	31.0	15	200.5	194.5	-	6.0	3
EXPENDITURES	64,854	70,809		5,955	9	23,193	21,656	-	1,537	7	54,665	56,503		1,838	3
TOTAL COSTS															
POSITIONS	192.5	161.0	-	31.5	16	200.5	169.5	-	31.0	15	200.5	194.5	-	6.0	3
EXPENDITURES	64,854	70,809		5,955	9	23,193	21,656	-	1,537	7	54,665	56,503		1,838	3
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06						
					PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%	
PART II: MEASURES OF EFFECTIVENESS															
1. % CONSUMERS AT HIGH INTENSITY FUNCTIONAL LEVEL					7	7				7	7				
2. % CONSUMERS AT MODERATE INTENSITY FUNCTNL LEVEL					77	76	-	1	1	77	76	-	1	1	
3. % CONSUMERS AT LOW INTENSITY FUNCTIONAL LEVEL					16	17	+	1	6	16	17	+	1	6	
4. PERCENTAGE OF CONSUMERS ARRESTED					4	7	+	3	75	4	7	+	3	75	
5. % CONSUMERS LIVING INDEPENDENTLY					64	67	+	3	5	64	69	+	5	8	
6. % CONSUMERS EMPLOYED					18	20	+	2	11	18	20	+	2	11	
7. % OF SATISFIED CONSUMERS					85	NA				85	NA				
PART III: PROGRAM TARGET GROUP															
1. # CONSUMERS W/SEVERE MENTAL ILLNESS NEEDG SVCS					26,564	25,400	-	1,164	4	27,000	25,600	-	1,400	5	
2. # PERSONS W/SEVERE ACUTE MENTAL HEALTH CRISIS					6772	NA				6800	NA				
PART IV: PROGRAM ACTIVITIES															
1. NO. OF CONSUMERS SERVED: OUTPATIENT SERVICES					3600	NA				3600	NA				
2. # CONSUMERS SERVED: ASSERTIVE COMMUNITY TRTMT SVS					380	762	+	382	101	380	890	+	510	134	
3. NO. OF CONSUMERS SERVED: CLUBHOUSE REHAB SVCS					600	719	+	119	20	600	775	+	175	29	
4. NO. OF NEW ADMISSIONS					415	NA				415	NA				
5. NO. OF DISCHARGES					850	NA				850	NA				
6. # OF INDIVIDUALS PLACED IN COMMUNITY HOUSING					370	NA				370	NA				
7. #OF CONSUMERS SERVED: CRISIS INTERVENTION SVCS.					22,351	30,489	+	8,138	36	22,400	30,500	+	8,100	36	

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 03 01
HTH 420

PROGRAM TITLE: Adult Mental Health - Outpatient

Part I – EXPENDITURES AND POSITIONS

FY 04-05– At the end of the fiscal year, there were 31.50 vacant positions. 22.5 positions were under recruitment, 3.0 positions were being redescribed, 5.0 positions were kept vacant and the funds used for exempt positions, and 1.0 position was kept vacant and the funds used to pay contracted services. The expenditure variance was a result of an emergency appropriation.

FY 05-06 – At the end of the 1st quarter of FY 06, there were 31.0 vacant positions. 23.0 positions were under recruitment, 2.0 positions were being redescribed, and 6.0 positions were kept vacant and the funds used for exempt positions. The expenditure variance was due to delays in the execution of purchase of service contracts. At the end of the fiscal year, 6.0 positions are projected to be vacant with their funds used for exempt positions.

Part II – MEASURES OF EFFECTIVENESS

5. The variance for both fiscal years is a result of the change in eligibility criteria leading to an increase in the number of consumers served with co-occurring mental illness and substance abuse disorders. Many of these consumers have some involvement with the criminal justice system.

7. The variance for both fiscal years is due to the continued expansion in the number of clubhouses being operated by the Community Mental Health Centers and the integration of supported employment specialists into the system.

Part III – PROGRAM TARGET GROUPS

No significant variances.

Part IV – PROGRAM ACTIVITIES

2. An increase in the number of assertive community treatment slots being contracted for is the reason for the corresponding increase in the number of consumers served.

3. The variances are due to the continued expansion in the number of clubhouses being operated by the Community Mental Health Centers.

8. The variances are a result of the increasing awareness of the availability and use of AMHD's Access Line.

STATE OF HAWAII
PROGRAM TITLE:

ADULT MENTAL HEALTH - INPATIENT

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

HTH - 430

PROGRAM STRUCTURE NO: **050302**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
<u>PART I: EXPENDITURES & POSITIONS</u>															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
	627.5	504.0	-	123.5	20	627.5	514.0	-	113.5	18	627.5	544.0	-	83.5	13
	46,673	49,723		3,050	7	11,890	11,756	-	134	1	37,499	38,519		1,020	3
	627.5	504.0	-	123.5	20	627.5	514.0	-	113.5	18	627.5	544.0	-	83.5	13
	46,673	49,723		3,050	7	11,890	11,756	-	134	1	37,499	38,519		1,020	3
						FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
						PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%
<u>PART II: MEASURES OF EFFECTIVENESS</u>															
1. % PATIENTS DISCHARGED TO COMMUN-BASED SERVICES						100	57	-	43	43	100	57	-	43	43
2. % TREATED/DISCH W/CONTIN COMMUN TENURE > 12 MONS						25	19	-	6	24	25	19	-	6	24
<u>PART III: PROGRAM TARGET GROUP</u>															
1. # PENAL COMMITMENT PATIENTS						160	158	-	2	1	160	158	-	2	1
2. # CIVIL COMMITMENT PATIENTS						30	19	-	11	37	30	19	-	11	37
<u>PART IV: PROGRAM ACTIVITIES</u>															
1. # NEW ADMISSIONS						110	80	-	30	27	110	80	-	30	27
2. # READMISSIONS						80	102	+	22	28	80	102	+	22	28
3. # DISCHARGES						180	168	-	12	7	180	168	-	12	7
4. # FORENSIC/COURT-ORDERED ADMISSIONS						190	177	-	13	7	190	177	-	13	7
5. # PATIENTS RECEIVING SERVICES IN THE REHAB UNITS						380	360	-	20	5	380	360	-	20	5

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 03 02
HTH 430

PROGRAM TITLE: Adult Mental Health - Inpatient

Part I – EXPENDITURES AND POSITIONS

FY 04-05: At the end of FY 04-05, there were 123.50 vacant positions; 89.0 were under recruitment, 1.0 was being redescribed, 9.50 were kept vacant and the funds used for fee-for-service contracts, 1.0 was being established and the remaining 23.0 newly established positions were internally restricted to cover a potential budget shortfall.

FY 04-05: There was a significant variance between budgeted and actual expenditures for FY 04-05. An emergency appropriation in the amount of \$1,640,000 was allotted to Hawaii State Hospital (HSH) to cover their increased expenditures to continue services, operations, and upkeep. The cost variance was significant due to a sustained increase in the census level throughout the fiscal year. Increased bed day usage at Kahi Mohala (community based inpatient services), increased hiring of agency nursing staff, fee-for service psychiatrists, increased cost and usage of drugs/biologics, medical services, unplanned and unanticipated expenses related to the maintenance of the security management and life safety systems at the hospital, and increased utility costs, all contributed to the variance.

FY 05-06: As of September 30, 2005, there were 113.50 vacant positions; 82.0 were under recruitment, 1.0 was being redescribed, 7.50 were left vacant to fund fee-for-service contracts, 1.0 will be established and 22.0 are currently planned for delayed hiring to cover a potential budget shortfall.

FY 05-06: The variance in the last three quarters of the fiscal year is due to collective bargaining augmentation.

Part II – MEASURES OF EFFECTIVENESS

1. The variance is attributed to a short supply of higher acuity beds in community-based services. While the range of community options continues to increase, as do efforts to assure that all patients pending discharge have

community plans in place, the number of community beds, especially those of higher acuity remain in short supply.

2. This change may reflect the increasing numbers of patients admitted to HSH with significant legal encumbrances that lead to a longer length of stay.

Part III – PROGRAM TARGET GROUPS

2. The number of patients with civil commitments is less than planned partly because of the Adult Mental Health Division's continuing efforts to place clients in outpatient community based services that have started up over the past year.

Part IV – PROGRAM ACTIVITIES

1. The variance in the number of actual admissions may be due in part to the high census that limits admissions to primarily court ordered patients only. The ability to divert less severe clients into community based services also plays a part in the variance reported for both years.
2. The variance is reflective of a higher level of clinical acuity and legal encumbrances of the population at HSH. Dual diagnoses patients have difficulty remaining stable in the community and results in impacting on HSH's recidivism rate.
3. This variance is reflective of a higher percentage of forensic appointments, higher complexity clients and a short supply of intensive community based beds.

STATE OF HAWAII
PROGRAM TITLE:

ALCOHOL & DRUG ABUSE

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: HTH - 440

PROGRAM STRUCTURE NO: 050303

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	28.0	28.0			28.0	28.0			28.0	28.0		
EXPENDITURES	19,902	17,507	- 2,395	12	15,233	14,444	- 789	5	9,248	10,075	827	9
TOTAL COSTS												
POSITIONS	28.0	28.0			28.0	28.0			28.0	28.0		
EXPENDITURES	19,902	17,507	- 2,395	12	15,233	14,444	- 789	5	9,248	10,075	827	9
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % CLIENTS COMPLETING TREATMENT		49	43	- 6	12	49	45	- 4	8			
2. % NATIVE HAWAIIANS COMPLETING TREATMENT		45	41	- 4	9	45	41	- 4	9			
3. % INJECTION DRUG USERS COMPLETING TREATMENT		25	35	+ 10	40	25	30	+ 5	20			
4. % CLIENTS W/REDUCED FREQ OF USE AT 6MO AFTER TRTMT		75	73	- 2	3	75	75					
5. % CLIENTS W/NO NEW ARRESTS AT 6 MON AFTER TRTMT		87	78	- 9	10	87	78	- 9	10			
6. % TRNG ATTENDEES REPTG TRNG WAS BENEFICIAL		99	99			99	99					
7. #SPEC TRTMT FACIL & THERAPEUTIC LIVG PROGS ACCRED		20	20			20	20					
8. #SUBS AB COUN,CLIN SUPS, PREV SPEC, PROG ADM CERT		45	42	- 3	7	45	42	- 3	7			
9. # CURRENT SUBST ABUSE NEEDS ASSESSMENTS COMPLTD						1	1					
10. %RANDOM VENDORS NOT SELL TOBACCO PRDTS TO MINORS		80	94.4	+ 14	18	80	94.4	+ 14	18			
PART III: PROGRAM TARGET GROUP												
1. PERSONS IN NEED OF SUBSTANCE ABUSE TREATMENT		106242	NA			106242	106242					
2. CONTRACTED PREVNTION & TREATMENT SERVICE PROVIDERS		25	38	+ 13	52	25	38	+ 13	52			
3. TRAINEES RECEIVG CONTINUING ED APPROVED UNITS		2,247	2,247			2,247	2,247					
4. #SPEC TRTMT FACIL & THERAP LIVG PROGS REQRG ACCRED		20	20			20	20					
5. #PERSONS APPLYG FOR CERTIF AS SUBST AB PROFESSNLS		200	193	- 7	4	200	193	- 7	4			
6. NEEDS ASSESSMENT SURVEY PARTICIPANTS		20,000	5,000	- 15,000	75							
7. TOBACCO VENDORS		1,010	945	- 65	6	1,010	945	- 65	6			
PART IV: PROGRAM ACTIVITIES												
1. # PERSONS RECEIVING TREATMENT		4,500	4,564	+ 64	1	4,500	4,500					
2. #SUBST ABUSE PREV&TRTMT CONTRACTS REQUIRG MONITORG		60	121	+ 61	102	60	121	+ 61	102			
3. #PERS RECVG SUBST ABUSE TRNG CONT ED APPRVD UNITS		2,247	2,247			2,247	2,247					
4. #SPEC TRT FACIL & THERP LIVG PRGS RVIEWD FOR ACCRD		20	23	+ 3	15	20	23	+ 3	15			
5. #APPLICS REVMD FOR ELIG FOR SUB AB PROF CERTIFCTN		200	193	- 7	4	200	193	- 7	4			
6. #SUB AB COUN,CLIN SUP,PREV SPC,PRG ADM EXAMS GIVEN		200	181	- 19	10	200	181	- 19	10			
7. #STATEWIDE NEEDS ASSESSMTS OR SPEC STUDIES CONDUCTD		1	1			1	1	+ 1	***			
8. #TOB VENDORS RANDMLY INSP NOT SELLG TO MINORS		215	205	- 10	5	215	205	- 10	5			

Variance Report Narrative
FY 2005 and FY 2006

PROGRAM TITLE: **Alcohol and Drug Abuse**

05 03 03
HTH440

PART 1 - EXPENDITURE AND POSITIONS

FY 2004 - 2005

The expenditure variance was primarily due to the over estimation of federal ceiling for the State Incentive Grant.

FY 2005-2006

The expenditure variance at the end of first quarter was due delays in contract execution with the expectation that it will be obligated in the second quarter.

PART II – MEASURES OF EFFECTIVENESS

Line 1–For adults, the decrease in completion rates may be due to the increase in the percentage of clients in treatment who are abusing crystal methamphetamine and as a result exhibit increased problem severity, such as cognitive deficits, that require a much longer length of stay for successful completion than is the current standard. For juveniles, high turnovers in substance abuse counselors in school settings have resulted in vacancies for significant periods. Having a positive relationship with a consistent counselor is of prime importance in retaining adolescents in treatment, which does not happen if there are vacancies and frequent changes.

Line 3–Service providers report positive results from the addition of a new vocational program that includes more focused case management activities for clients at greater risk of relapse.

Line 5–The percent of clients with no new arrests 6 months after treatment has likely increased due to the increased percentage of criminal justice clients in substance abuse treatment whose criminogenic thinking patterns are more difficult to change.

Line 10–The planned percent is based on the Federal Synar minimum percent compliance requirement for the States. This must be achieved or lose funding. The actual number of vendors who complied with laws prohibiting sales of tobacco to minors (i.e. who did not sell to minors) was actually 94.4%

PART III - PROGRAM TARGET GROUP

Line 1–Results of the adult household survey are still being analyzed so no “actual” numbers in need of substance abuse treatment are available at this time.

Line 2–Variance for both years was due to increased proposals developed and contracts executed due to increase in funding available for substance abuse programs.

Line 6–Telephone interviews phase of an adult household survey was conducted with a sample size of 5,000. The data analysis is forthcoming. No survey is expected to be conducted in FY 2006.

Line 7: The number of vendors to be inspected is based on listings in the local business directory and the sampling formula required by the Center for Substance Abuse Prevention (CSAP). Until vendor registration law becomes effective, the survey targets a sample of known vendors. Businesses frequently close or cease to sell tobacco products causing variations in the number. New vendors may not be readily identified.

PART IV - PROGRAM ACTIVITIES

Line 2. The variance for both years was due to an increase in contracts executed and increases in funding for substance abuse programs.

Line 8. The planned numbers for both years were incorrectly inputted as number of vendors surveyed—for FY 05 217 vendors were included in the survey. Of this number 205 did not sell tobacco to minors.

STATE OF HAWAII
PROGRAM TITLE:

CHILD & ADOLESCENT MENTAL HEALTH

PROGRAM-ID: **HTH - 460**

PROGRAM STRUCTURE NO: **050304**

VARIANCE REPORT

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	169.0	148.0	- 21.0	12	163.5	147.0	- 16.5	10	163.5	163.5		
EXPENDITURES	66,162	63,043	- 3,119	5	44,611	39,872	- 4,739	11	20,872	25,897	5,025	24
TOTAL COSTS												
POSITIONS	169.0	148.0	- 21.0	12	163.5	147.0	- 16.5	10	163.5	163.5		
EXPENDITURES	66,162	63,043	- 3,119	5	44,611	39,872	- 4,739	11	20,872	25,897	5,025	24
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % CHDRN/YOUTH ADMITTD TO RESIDENTIAL PROGRAMS	16	13	- 3	19	12	15	+ 3	25				
2. AVE LENGTH STAY (DAYS) CHDRN/YOUTH IN RES PRGM	250	210	- 40	16	205	225	+ 20	10				
3. % REG CHDRN/YOUTH SHOW IMPRVMT BY CAFAS/ACHENBACH	67	66	- 1	1	67	66	- 1	1				
4. % DIR SRV EXPENDITURES FOR WHICH FED REIMB RECVD	6	11	+ 5	83	6	11	+ 5	83				
5. % OF CHDRN & YOUTH UNSERVED > 30 DAYS	2		- 2	100	1	1						
6. %CHDRN/ADOL W/SRV MISMATCHES > 30 DAYS	5	.8	- 4	80	2	2						
7. % COMPLEX INT REVIEWS ACHIEVE PERFMCE RATING 85%	88	90	+ 2	2	85	92	+ 7	8				
8. % OF POS PROGRAMS MONITORED	100	100			100	100						
9. HOURS OF STAFF TRNG & DEV IN EVIDENCE BASES SRV	400	207	- 193	48	400	250	- 150	38				
10. HRS TRNG & DEV IN EVIDENCE BASES SRV TO PROVIDERS	300	241.5	- 58	19	400	250	- 150	38				
PART III: PROGRAM TARGET GROUP												
1. # CHRN/YOUTH IDENTIF UNDER IND W/DISABILITIES 504	2,000	1,950	- 50	3	2,000	2,000						
2. # CHRN IDENTIFIED BY CAMHD AS QUALIF FOR HI QUEST	1,110	727	- 383	35	1,100	1,000	- 100	9				
3. # CHRN/YOUTH IN RESIDENTIAL PROGRAMS	630	420	- 210	33	300	500	+ 200	67				
4. # CHRN/YOUTH RESIDING IN HI FROM 3 TO 21 YEARS AGE	300,000	308,000	+ 8,000	3	300,000	308,000	+ 8,000	3				
5. NUMBER OF PURCHASE OF SERVICE PROGRAMS	35	39	+ 4	11	35	41	+ 6	17				
PART IV: PROGRAM ACTIVITIES												
1. #CHRN/YOUTH RECV SRV IN HOSPITAL BASED RES PROG	75	62	- 13	17	75	75						
2. #CHRN/YOUTH RECV SRV NON- HOSPITAL BASED RES PROG	550	376	- 174	32	370	400	+ 30	8				
3. #CHRN/YOUTH RECV HOME & COMMUNITY BASED SERV	2,060	2,033	- 27	1	2,060	2,060						
4. TOTAL AMOUNT (IN 1000'S) BILLED FOR SRV PROVIDED	45,000	48,627	+ 3,627	8	44,000	51,630	+ 7,630	17				
5. # OF PURCHASE OF SERVICE PROGRAMS TO BE MONITORED	35	39	+ 4	11	35	41	+ 6	17				
6. TOTAL NUMBER OF HOURS DEVOTED TO STAFF TRNG & DEV	450	246.5	- 203	45	450	250	- 200	44				
7. TOTAL NUMBER OF HOURS DEVOTED TO TRNG OUTSIDE PROV	300	241.5	- 58	19	300	250	- 50	17				

VARIANCE REPORT NARRATIVE
FY 2005 and FY 2006

05 03 04
HTH 460

PROGRAM TITLE: Child and Adolescent Mental Health

Part I – EXPENDITURES AND POSITIONS

FY 2004-05: The approximately \$3.0 million variance is primarily due to: 1) a restructuring of the Multisystemic Therapy (MST) service to reflect utilization patterns with a resulting cost savings of approximately \$500,000; 2) a \$777,861 "restriction" placed on the program for efficiency savings; and 3) a reduction in Inter-departmental Transfer revenues as the Title IV-E reimbursement from the Department of Human Services was less than budgeted resulting in a decreased level of \$1.89+ million in expenditures. The number of vacant positions is attributable primarily to the fact that the CAMHD is attempting to replace their exempt positions (allowed under the Felix consent decree) with the appropriate civil service class sometimes resulting in delayed filling, especially where reorganization needs to be occur.

FY 2005-06: Variance in expenditures are the result of including collective bargaining augmentation in the annual estimate with the variance in first quarter occurring primarily due to delay in contract execution.

Part II – MEASURES OF EFFECTIVENESS

1. Admissions—serving youth in their homes and home communities whenever possible continues to be a core value for CAMHD. It is noteworthy that there were fewer clients admitted to the residential programs in FY 05 than expected, 13% vs. 16% of the total registered clients.
4. Federal reimbursements—the increase in federal reimbursement is attributed to the CAMHD's concerted effort to increase reimbursement through Medicaid.
5. & 6. Access—CAMHD continued to demonstrate stellar performance in client access to services.
7. & 8. Monitoring—90% of complexes achieved the performance goal of acceptable system performance at 85% or better. All contracted agencies were monitored as planned.
9. & 10. Training—the actual number of FY 05 training hours was less than planned since it only represented the formal in-class training that were completed and did not include the increasing number of hours of informal training that occurred in consultations, site visits and small group discussions.

Part III – PROGRAM TARGET GROUPS

2. QUEST—the penetration rates are for QUEST youth is lower than target. CAMHD is increasing its outreach services to address this need.

3. Residential services—there are a number of factors that may have influenced this positive outcome including serving more youth in-home—i.e. in FY 05 where the actual is considerably less than planned. At the case level, service data are constantly reviewed to provide services based on child and family needs, and provision of care within the least restrictive environment. However, in FY 06 registered youth appears to be increasing resulting in an estimated increase in residential services.

5. POS Programs—there was an increase in the number of purchase of service programs from 35 to 39 and an expected two more in FY 06.

Part IV – PROGRAM ACTIVITIES

1. Youth in Hospital-based Residential—in FY 05 efforts were made to keep youth out of the more expensive hospital based residential services through MST by placing clients in the least restrictive environment. However, as the clientele increases, the estimate for FY 06 may not materialize.
2. Youth in Non-Hospital Based Residential Services—in FY 05, this result of the actual less than planned is that there continues to be efforts to provide youth with less costly but appropriate services.
4. Amount Billed for Services—planned figures inadvertently did not include services funded with special or federal funding which could be billable.
5. Program Monitoring—see above Target Group, item #5 where number of POS programs increased.
6. & 7. Training—the actual number of training hours in FY05 was less than planned since it only represented the formal in-class training that was completed and did not include the increasing number of hours of informal training that occurred in consultations, site visits and small group discussions. Research shows that practice improvements can be expected when more in-depth informal training through consultation, site visits and small group discussion follow the formal in-class training. With the stabilization in both the Family Guidance Center staff and the less number of hours training provided to POS providers, the downward trend of training provided is expected to continue in FY 06.

STATE OF HAWAII
PROGRAM TITLE:

BEHAVIORAL HEALTH ADMINISTRATION
HTH - 495
PROGRAM STRUCTURE NO: 050305

VARIANCE REPORT

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
</															

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 03 05
HTH 495

PROGRAM TITLE: Behavioral Health Administration

Part I – EXPENDITURES AND POSITIONS

FY 04-05– At the end of the fiscal year, there were 26.0 vacant positions. 6.0 positions were under recruitment and 20.0 positions were kept vacant and the funds used for exempt positions. The expenditure variance was a result of delays in the establishment and filling of new positions.

FY 05-06 – At the end of the 1st quarter of FY 06, there were 27.0 vacant positions. 6.0 positions were under recruitment and 21.0 positions were kept vacant and the funds used for exempt positions. At the end of the fiscal year, 21.0 positions are expected to be vacant with their funds used for exempt positions.

Part II – MEASURES OF EFFECTIVENESS

No significant variances.

Part III – PROGRAM TARGET GROUPS

No significant variances.

Part IV – PROGRAM ACTIVITIES

8. The variance for both fiscal years is a result of an increased emphasis in training purchase of service providers in evidence-based practices for recovery planning and assertive community treatment services.

STATE OF HAWAII
PROGRAM TITLE:

ENVIRONMENTAL HEALTH

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: **0504**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII
PROGRAM TITLE:
PROGRAM-ID:
PROGRAM STRUCTURE NO:

ENVIRONMENTAL HEALTH SERVICES
HTH - 610
050401

VARIANCE REPORT

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	156.0	139.0	-	17.0	11	156.0	143.0	-	13.0	8	156.0	156.0
EXPENDITURES	7,798	7,602	-	196	3	2,164	1,785	-	379	18	6,357	6,905
											548	9
TOTAL COSTS												
POSITIONS	156.0	139.0	-	17.0	11	156.0	143.0	-	13.0	8	156.0	156.0
EXPENDITURES	7,798	7,602	-	196	3	2,164	1,785	-	379	18	6,357	6,905
											548	9
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % SCHOOLS IN COMPLIANCE WITH AHERA (N&R)	95	89	-	6	6	95	95					
2. % OF MOSQUITO BREEDING SITES TREATED (VC)	60	49	-	11	18	60	60					
3. %SML MAMMALS TRAPPED TESTED FOR VECT-BRN DIS (VC)	5	85	+	80	600	5	85	+	80	600		
4. % SERVICE REQUESTS RESPONDED W/IN 2 DAYS (VC)	79	78	-	1	1	79	78	-	1	1		
5. % OF FOOD PRODUCTS ANALYZED NOT ADULTERATED (F&D)	90	90				90	90					
6. %FOOD SVC ESTABLISHMENTS THAT MEET STANDRDS (SAN)	98	100	+	2	2	98	100	+	2	2		
7. % COMPLAINTS RESOLVED W/IN 14 DAYS OF RECPT (SAN)	77	70	-	7	9	77	77					
8. % NOISE PERMITS IN COMPLIANCE (N&R)	99	99				99	99					
9. % OF RADIATION FACILITIES IN COMPLIANCE (N&R)	50	58	+	8	16	50	50					
10. %PERMITTED AC & VENTILTIN SYS IN COMPLIANCE (N&R)	95	97	+	2	2	55	95	+	40	73		
PART III: PROGRAM TARGET GROUP												
1. #SCHOOLS REQUIRED TO MAINT ASBESTOS MGT PLAN (N&R)	435	423	-	12	3	435	435					
2. # MOSQUITO BREEDING SITES LOCATED (VC)	9,000	10,102	+	1,102	12	9,000	9,000					
3. # SMALL MAMMALS TRAPPED (VC)	3,000	3,223	+	223	7	3,000	3,000					
4. # SERVICE REQUESTS INVESTIGATED (VC)	4,500	5,455	+	955	21	4,500	5,500	+	1,000	22		
5. # OF FOOD PRODUCTS SAMPLED (F&D)	500	500				500	500					
6. # OF FOOD ESTABLISHMENTS (SAN)	10,103	7,045	-	3,058	30	10,103	7,100	-	3,003	30		
7. # OF COMPLAINTS RECEIVED (SAN)	2,037	1,674	-	363	18	2,037	2,037					
8. # NOISE PERMITS ISSUED (N&R)	400	482	+	82	21	400	450	+	50	13		
9. # OF RADIATION FACILITIES (N&R)	1,111	1,104	-	7	1	1,111	1,110	-	1			
10. # OF AC & VENTILATION SYSTEMS PERMITS ISSUED (N&R)	800	544	-	256	32	800	600	-	200	25		
PART IV: PROGRAM ACTIVITIES												
1. # INSPECTIONS OF AHERA SOURCES (N&R)	95	81	-	14	15	95	80	-	15	16		
2. # OF MOSQUITO BREEDING SITES INSPECTED (VC)	1,800	13,099	+	11,299	628	1,800	13,000	+	11,200	622		
3. #SML MAM TRAPPG SURVEYS FOR TESTING PURP (VC)	2,000	1,248	-	752	38	2,000	2,000					
4. #PREMISES INSPECTD DUE TO SVS REQUESTS RCVD (VC)	7,000	13,477	+	6,477	93	7,000	13,000	+	6,000	86		
5. # FOOD PRODUCTS ANALYZED (F&D)	500	500				500	500					
6. # FOOD SERVICE ESTABLISHMENTS INSPECTED (SAN)	10,132	9,416	-	716	7	10,132	9,500	-	632	6		
7. # OF COMPLAINTS INVESTIGATED (SAN)	1,500	1,674	+	174	12	1,500	1,600	+	100	7		
8. # NOISE PERMIT INSPECTIONS (N&R)	750	384	-	366	49	750	450	-	300	40		
9. # INSPECTIONS OF RADIATION FACILITIES (N&R)	180	181	+	1	1	180	180					
10. # OF AC & VENT SYSTEM PERMIT FACIL INSPECTED (N&R)	180	180				180	180					

VARIANCE REPORT NARRATIVE
FY 05 AND FY 06

05 04 01
HTH 610

PROGRAM TITLE: Environmental Health Services

Part I – EXPENDITURES AND POSITIONS

Positions: The variance for FY 2005 reflects recruitment difficulties in finding qualified applicants in a tight economy.

Expenditures: The variance for the 1st quarter of FY 2006 reflects vacancy savings and operating expenses associated with these vacancies. The estimated expenditures for the balance of FY 2006 represents the 1st quarter adjustment and other planned expenses.

Item 4: Increases for FY 2005 and the 1st quarter of FY 2006 can be attributed to increase public awareness of mosquito/rodent problems and vector control services often following press releases.

Item 6: For FY 2005, no present explanation for the decrease in the number of food establishments. Economic situations usually determine the opening or closure of these types of businesses. For FY 2006, the decreased number reflects that the number of food establishments should remain similar based on current economic trends.

Part II – MEASURES OF EFFECTIVENESS

Item 2: The decrease in the percentage of breeding sites reflects more effective controls and mitigation of these sites.

Item 3: FY 2005 increase in percentage of mammals tested is due to re-direction of laboratory priorities. This re-direction is expected to continue into FY 2006.

Item 9: The 16% increase in FY 2005 reflects re-prioritizing of program objectives to overcome staffing shortage and thereby increasing efficiencies.

Item 7: FY 2005, decrease cannot be reasonably explained other than the public and their concerns are variable from year to year.

Item 8: The 21% increase for FY 2005 is attributable to economic development. A modest increase is expected to continue for FY 2006.

Item 10: FY 2005 and FY 2006 decreases in AC/Ventilation permits issued maybe due to fewer large scale commercial developments.

Part III – PROGRAM TARGET GROUPS

Item 2: FY 2005 increase reflects an increase in the number of breeding sites located due to enhanced West Nile Virus surveillance.

Part IV – PROGRAM ACTIVITIES

Item 1: The 15% decrease in inspections is due to staff member on active military duty for FY 2005. This trend is expected to continue for FY 2006.

Item 2: Please refer to Part III, Item 2.

STATE OF HAWAII
PROGRAM TITLE:

STATE LABORATORY SERVICES

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID:

HTH - 710

PROGRAM STRUCTURE NO: **050402**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES															
OPERATING COSTS POSITIONS EXPENDITURES	86.0 5,148	79.0 5,274	-	7.0 126	8 2	84.0 1,438	78.0 1,301	-	6.0 137	7 10	84.0 3,909	84.0 4,146		237	6
TOTAL COSTS POSITIONS EXPENDITURES	86.0 5,148	79.0 5,274	-	7.0 126	8 2	84.0 1,438	78.0 1,301	-	6.0 137	7 10	84.0 3,909	84.0 4,146		237	6
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06						
					PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%	
PART II: MEASURES OF EFFECTIVENESS															
1. % FALSE POSITIVE LAB TEST RESULTS															
2. % FALSE NEGATIVE LAB TEST RESULTS															
3. % REQUESTS FOR SERVICES MET					99	100	+	1	1	99	100	+	1	1	
4. % PROFICIENCY TESTS PERFRMD MEETG PROFCNY STDS					100	100				100	100				
PART III: PROGRAM TARGET GROUP															
1. OTHER DEPARTMENT OF HEALTH PROGRAMS					9	9				9	9				
2. # LABS PERFORMG CLINICAL DIAG TESTING					749	764	+	15	2	764	764				
3. OTHER GOVERNMENT AGENCIES					7	7				7	7				
4. # LABS PERFORMG SUBSTANCE ABUSE TESTING					2	2				2	2				
5. # CLIN LAB PERSONNEL APPLYING FOR LICENSURE					65	70	+	5	8	90	90				
6. # LICENSED CLINICAL LAB PERSONNEL					1,385	1,301	-	84	6	1,250	1,350	+	100	8	
7. # LABS PERFORMING ENVIRONMENTAL TESTING					18	19	+	1	6	19	19				
PART IV: PROGRAM ACTIVITIES															
1. DRINKING WATER (WORK TIME UNITS)					344,500	606,675	+	262,175	76	495,000	610,250	+	115,250	23	
2. OTHER COMMUNICABLE DISEASES (WORK TIME UNITS)					751,932	1,024,239	+	272,307	36	854,000	829,252	-	24,748	3	
3. WATER POLLUTION (WORK TIME UNITS)					239,528	285,840	+	46,312	19	240,000	319,168	+	79,168	33	
4. SEXUALLY TRANSMITTED DISEASE (WORK TIME UNITS)					414,950	288,879	-	126,071	30	320,000	294,500	-	25,500	8	
5. TUBERCULOSIS (WORK TIME UNITS)					204,300	161,236	-	43,064	21	152,000	156,700	+	4,700	3	
6. FOOD AND DRUGS (WORK TIME UNITS)					222,100	285,838	+	63,738	29	325,000	283,200	-	41,800	13	
7. AIR POLLUTION (WORK TIME UNITS)					779,456	779,500	+	44		779,500	779,500				
8. # LABORATORY INSPECTIONS					15	17	+	2	13	15	15				
9. # LAB PERSONNEL RECEIVING FORMAL LAB TRAINING					103	136	+	33	32	108	138	+	30	28	

VARIANCE REPORT NARRATIVE
FY 05 and FY 06

05 04 02
HTH 710

PROGRAM TITLE: State Laboratory Services

Part I – EXPENDITURES AND POSITIONS

FY 2004-2005

There were seven positions vacant at the end of the fiscal year. The vacancies were due to resignations and promotions.

FY 2005-2006

There were six positions vacant at the end of the first quarter. The general fund allocation for this program totals \$5,446,871.

Part II - MEASURES OF EFFECTIVENESS

Numbers 1 through 4. No significant variance.

Part III - PROGRAM TARGET GROUP

Numbers 1 through 7. No significant variance.

Part IV - PROGRAM ACTIVITIES

1. The positive variance is due to increased testing to meet the Environmental Protection Agency's three year compliance cycle. Another factor is the disinfection byproduct rule which made increased sampling necessary.

2. The positive variance is due to the increased number of specimens that were submitted for influenza isolation.
3. The positive variance is due to the increase in samples tested in response to increased water monitoring activities. The increased monitoring is in response to public demands and federal agency requirements.
4. The negative variance is due to the decline in the number of specimen submissions for *Chlamydia trachomatis* / *Neisseria gonorrhoeae* by nucleic acid amplification testing (NAAT). The Region IX Infertility Prevention Project redefined the age of women recommended for testing from family planning centers to women age 29 and younger. In addition, the STD program did not increase the number of specimen submissions for some high risk populations due to the cost constraints of performing NAAT testing.
5. The negative variance in the Tuberculosis work time units is due to the decline in the number of specimens submitted for Mycobacteria isolation from Hawaii and Saipan.
6. The positive variance is due to an accounting change made in FY 2004 where a single extraction and its multiple analyses were counted instead of one extraction and one analysis. The new accounting method is a better and more accurate measure of work time units.
9. The positive variance in FY 2005 is due an aggressive effort to train laboratory personnel on laboratory safety practices; packing and shipping of infectious and dangerous substances; and effective crisis communications.

- Item 3: The 38% decrease in FY 2005 reflects fewer number of typhus and leptospirosis cases.

PART IV – PROGRAM ACTIVITIES (CONTINUED)

- Item 4: The increases for both fiscal years is due to increased number of mosquito complaints received in FY 2005 and the trend to continue with increases in the number of premises to be inspected due to West Nile Virus awareness.
- Item 6: The number for FY 2005 represents all food establishment inspections completed. Some establishments with high risk for food borne illnesses or identified problems are inspected more frequently. Those that may be considered low risk are inspected less frequently. Activities must be prioritized to address high risk establishments particularly due to staff shortages. This trend is expected to continue for FY 2006.
- Item 7: Please refer to Item 6 above. Frequency of inspections are due to risk factors and prioritizing due to staff shortage.
- Item 8: Reduction of 49% in the number of inspections due primarily to staff shortages for FY 2005. This trend is expected to continue in FY 2006.

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STATE OF HAWAII
PROGRAM TITLE:

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: HTH - 720

PROGRAM STRUCTURE NO: 050403

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
	40.1	36.8	-	3.3	8	36.8	36.8				36.8	36.8			
	3,122	2,698	-	424	14	742	679	-	63	8	2,438	2,172	-	266	11
	40.1	36.8	-	3.3	8	36.8	36.8				36.8	36.8			
	3,122	2,698	-	424	14	742	679	-	63	8	2,438	2,172	-	266	11
						FISCAL YEAR 2004-05				FISCAL YEAR 2005-06					
						PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%
PART II: MEASURES OF EFFECTIVENESS															
1. % FAC MTG MINIMUM LICENSURE/CERTIFICATION REQUIRE						100	95	-	5	5	100	95	-	5	5
2. % UNLICENSED SETTINGS BROUGHT INTO COMPLIANCE						100	95	-	5	5	100	95	-	5	5
3. % COMPLAINTS INVEST & CORR ACTION COMPLETED						100	95	-	5	5	100	95	-	5	5
PART III: PROGRAM TARGET GROUP															
1. HOSPITALS						33	31	-	2	6	33	31	-	2	6
2. NURSING HOMES (SKILLED & INTERMEDIATE)						48	49	+	1	2	48	49	+	1	2
3. ADULT RESIDENTIAL CARE HOMES/EXPANDED						685	689	+	4	1	685	695	+	10	1
4. SPECIAL TREATMENT FAC/THERAPEUTIC LIVING PROGRAMS						50	53	+	3	6	50	53	+	3	6
5. INTERMEDIATE CARE FAC/MENTALLY RETARDED						21	21				21	21			
6. CLINICAL LABORATORIES						816	816				816	816			
7. END STAGE RENAL DIALYSIS UNITS						18	4	-	14	78	19	6	-	13	68
8. DEVELOPMENTAL DISABILITIES DOMICILIARY HOMES						45	29	-	16	36	45	29	-	16	36
9. HOME HEALTH AGENCIES						19	20	+	1	5	19	20	+	1	5
10. ASSISTED LIVING FACILITIES						8	10	+	2	25	8	10	+	2	25
PART IV: PROGRAM ACTIVITIES															
1. HOSP LICENSING & COMPLIANCE VISITS						19	19				19	19			
2. NURSING HOMES LICENSING & COMPLIANCE VISITS						94	94				94	94			
3. ARCH/EXPANDED LICENSING & COMPLIANCE VISITS						3,500	3,500				3,500	3,500			
4. SPEC TREAT FAC/THERA LVG PROG LIC & COMPL VISITS						210	210				210	210			
5. ICF/MR LICENSING & COMPLIANCE VISITS						36	36				36	36			
6. CLINICAL LABS LICENSING & COMPLIANCE VISITS						57	57				57	57			
7. ASSTD LIVG FACILITIES LICENSING & COMPLIANCE VISITS						2	5	+	3	150	2	5	+	3	150
8. DD DOMICILIARY HOMES LICENSING & COMPLIANCE VISITS						200	100	-	100	50	200	100	-	100	50
9. HOME HEALTH AGENCIES LICENSING & COMPLIANCE VISITS						8	8				8	8			
10. ENFORCMT ACT. FOR UNLICENSED FACIL & SERVI						200	200				200	200			

**VARIANCE REPORT NARRATIVE
FY 05 and FY 06**

05 04 03
HTH 720

PROGRAM TITLE: MEDICAL FACILITIES—STDS, INSPECTION &, LICENSING

Part I – EXPENDITURES AND POSITIONS

In FY 2004-05, the Office of Health Care Assurance (OHCA) continues to have difficulty meeting all requirements as set forth by statutes and federal contractual obligations because of vacancies due to retirement and/or termination and staff illness. Although OHCA continues with the recruitment process, it is difficult to find competent staff that are willing to travel and be flexible with work demands.

In FY 2005-06, OHCA anticipates filling all its authorized vacant positions in order to meet all federal contractual requirements. Additionally, it is not expected that there will be any expenditures from Hospital & Medical Facilities Special Fund as the Administrative Rules have not been promulgated.

Part II – MEASURES OF EFFECTIVENESS

In FY 2004-05, OHCA has been successful in meeting much of the timelines for survey activities despite vacancies and new staff.

In FY 2005-06, OHCA anticipates being able to meet time lines as there will be increased efforts to fill vacant positions.

Part III – PROGRAM TARGET GROUPS

- 3) FY 2005-06 – OHCA anticipates an increase in the number of providers due to an increase seen in applications received.
- 7) FY 2004-05 – There was a decrease in the number of providers due to closure and change in provider type.

FY 2005-06 – The Centers for Medical and Medicaid Services (CMS) will be changing its survey requirements for this provider category due to steady rise in individuals requiring renal dialysis and emphasis being placed on improving care provision.

- 8) FY 2005-06 – OHCA does not anticipate an increase in the number of providers.
- 10) FY 2004-05 – There was a slight increase in number of providers and the program expects this increase to remain for FY 2005-06.

Part IV – PROGRAM ACTIVITIES

- 7) FY 2004-05 – Due to an increase in the number of providers, there was an increase in the number of licensing and compliance visits conducted.

FY 2005-06 – Anticipate an increase in the number of licensing and compliance visits with the increased number of providers.

- 8) FY 2004-05 – Due to a decrease in the number of providers, there was a decrease in the number of licensing and compliance visits conducted.

FY 2005-06 – OHCA does not anticipate an increase in the numbers of licensing visits as it is not anticipated there will be a great increase in the number of providers.

STATE OF HAWAII

PROGRAM TITLE:

OVERALL PROGRAM SUPPORT

VARIANCE REPORT

REPORT V61

11/22/05

PROGRAM-ID:

PROGRAM STRUCTURE NO: 0505

	FISCAL YEAR 2004-05					THREE MONTHS ENDED 9-30-05					NINE MONTHS ENDING 6-30-06				
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES															
OPERATING COSTS POSITIONS EXPENDITURES															
TOTAL COSTS POSITIONS EXPENDITURES															
	162.5	150.5	-	12.0	7	162.5	161.5	-	1.0	1	162.5	162.5			
	11,557	10,990	-	567	5	2,655	2,487	-	168	6	9,328	9,796		468	5
	162.5	150.5	-	12.0	7	162.5	161.5	-	1.0	1	162.5	162.5			
	11,557	10,990	-	567	5	2,655	2,487	-	168	6	9,328	9,796		468	5
						FISCAL YEAR 2004-05					FISCAL YEAR 2005-06				
						PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%
PART II: MEASURES OF EFFECTIVENESS															
1. % CON APPLIC RELATING TO HSFP						85	85				95	85	-	10	11
2. % STRATEGIES COMPLETED IN HI STATE DD PLAN						75	71	-	4	5	100	95	-	5	5
3. % GRIEVANCES RESOLVED (DOH-STAFF ADMIN						88	67	-	21	24	88	80	-	8	9

Intermediate Level Program
No Narrative
(See Lowest Level Programs for Explanation of Budget Requests)

STATE OF HAWAII

PROGRAM TITLE:

COMPREHENSIVE HEALTH PLANNING**VARIANCE REPORT**

REPORT V61

11/22/05

PROGRAM-ID:

HTH - 906PROGRAM STRUCTURE NO: **050501**

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06				
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%	
PART I: EXPENDITURES & POSITIONS													
RESEARCH & DEVELOPMENT COSTS POSITIONS EXPENDITURES													
OPERATING COSTS POSITIONS EXPENDITURES	8.0 516	8.0 476	- 40	8	8.0 133	8.0 125	- 8	6	8.0 401	8.0 420	19	5	
TOTAL COSTS POSITIONS EXPENDITURES	8.0 516	8.0 476	- 40	8	8.0 133	8.0 125	- 8	6	8.0 401	8.0 420	19	5	
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06				
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%	
PART II: MEASURES OF EFFECTIVENESS													
1. % CERT OF NEED APPL RELATING TO HTH SVS & FAC PLAN					93	93			95	95			
2. % CON APPL APPRVD BASED ON FINDGS REL TO HSFP					85	85			85	85			
3. % SHCC MTG TIME SPENT ON REVU/RECOM ON CERT APPL					25	25			25	25			
4. % SHCC MEETG TIME SPENT ON REVU/REVSG/APPRV HSFP					30	30			30	30			
5. % SAC MTG TIME SPENT ON REVU/RECOM ON CERT APPL					35	35			35	35			
6. % SAC MEETG TIME SPENT ON REVU/REVSG/APPRV HSFP					35	35			35	35			
7. % PREVIOUS YEAR'S CON APPROVALS MONITORED					100	100			100	100			
8. % HEALTH CARE FAC SUBM SEMI-ANN REPTS ON TIME					95	95			95	95			
9. %USERS RATG SEMI-ANN REPTS AS HELPFUL/VERY HELPFUL					90	90			90	90			
10. NUMBER OF SPECIAL REPORTS PUBLISHED					2	2			2	2			
PART III: PROGRAM TARGET GROUP													
1. ALL RESIDENTS IN THE STATE OF HAWAII					1,269	1,263	-	6	1,269	2,263	+	994	78
2. VOLUNTEERS INVOLVED IN SHCC/SUBAREA COUNCILS					140	140			140	140			
3. PUBLIC AND PRIVATE HEALTH CARE SERVICE PROVIDERS					85	85			85	85			
4. HEALTH CARE RESEARCHERS AND DEVELOPERS					35	35			35	35			
5. HEALTH CARE FOCUSED ASSOCIATIONS					12	12			12	12			
PART IV: PROGRAM ACTIVITIES													
1. PLNNG, RESEARCH & REVIEW ACTIV (PROF PERSON DAYS)					790	790			790	790			
2. DATA MANAGEMENT ACTIVITIES					212	212			212	212			
3. HSHCC AND SAC SUPPORT AND TRAINING					225	225			225	225			

Variance Report Narrative
FY 2005 and FY 2006

PROGRAM TITLE: Comprehensive Health Planning

05 05 01
HTH 906

Part I – EXPENDITURES AND POSITIONS

No significant variance.

Part II – MEASURES OF EFFECTIVENESS

No significant variance.

Part III – PROGRAM TARGET GROUP

No significant variance.

Part IV – PROGRAM ACTIVITIES

No significant variance.

STATE OF HAWAII
PROGRAM TITLE:

HEALTH STATUS MONITORING

VARIANCE REPORT

REPORT V61
11/22/05

PROGRAM-ID: HTH - 760

PROGRAM STRUCTURE NO: 050502

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06						
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES															
OPERATING COSTS															
POSITIONS															
EXPENDITURES															
TOTAL COSTS															
POSITIONS															
EXPENDITURES															
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06						
					PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%	
PART II: MEASURES OF EFFECTIVENESS															
1. % VITAL RECORDS ISS W/IN 10 DAYS OF REQUEST					85	69	-	16	19	85	80	-	5	6	
2. % INTERVIEWS COMPLETED (SURVEY EFFICIENCY)					50	50				50	50				
3. % OF TARGETED RESEARCH & STAT REPORTS DISSEM					80	100	+	20	25	80	80				
PART III: PROGRAM TARGET GROUP															
1. NUMBER OF DOH PROGRAMS					87	87				87	87				
2. HAWAIIANS & OTHER ETHNIC GROUPS					1,270,184	1,262,840	-	7,344	1	1,289,237	1,275,468	-	13,769	1	
3. VITAL EVENT REGISTRANTS					87,000	89,635	+	2,635	3	90,000	89,000	-	1,000	1	
4. RESIDENT NON-INSTITUTIONALIZED POPLTN HOUSEHOLDS					423,635	427,673	+	4,038	1	429,990	431,950	+	1,960		
5. ADULT POPULATION 18 AND OVER					968,668	964,147	-	4,521		983,198	973,798	-	9,400	1	
PART IV: PROGRAM ACTIVITIES															
1. # MAJ HEALTH STATS REQUESTS FULFILLD (OUTSIDE DOH)					95	90	-	5	5	100	85	-	15	15	
2. # OF HOUSEHOLDS INTERVIEWED IN HEALTH SURVEY					6,000	6,769	+	769	13	6,000	6,000				
3. # OF VITAL EVENTS REGISTERED					60,000	60,792	+	792	1	60,500	60,000	-	500	1	
4. # OF VITAL RECORD CERTIFICATES ISSUED					275,000	277,877	+	2,877	1	275,000	275,000				
5. # NEW DATA SETS/STAT ITEMS DISSEM ELECTRONICALLY					6	6				6	6				

VARIANCE REPORT NARRATIVE
FY 2005 and FY 2006

05 05 02
HTH 760

PROGRAM TITLE: **Health Status Monitoring**

Part I – EXPENDITURES AND POSITIONS

FY 2004-05

No significant expenditure variances but there were three (3) permanent vacant positions as of June 30, 2005—two general funded and one federally funded. The federally funded position has been filled and one of the general funded positions has been abolished. The third position was due to a retirement and that position will be variances as part of a reorganization effort.

FY 2005-06

First quarter expenditure variance primarily due to the fact that Federal funds were not expended at the level allocated but the program expects to “catch-up” in the remaining quarters. The total estimated annual expenditures greater than budgeted because of collective bargaining augmentation.

Part II – MEASURES OF EFFECTIVENESS

Item 1- The variance in FY 2004-05 is due to the increased number of orders but no increase in staff.

Item 4 – The variance in FY 2004-05 is due to a concerted effort to disseminate the targeted research and statistics reports.

Part III – PROGRAM TARGET GROUPS

No significant variances.

Part IV – PROGRAM ACTIVITIES

Item 1 – For FY 2005-06, OHSM estimates a less than planned number of major health statistics requests because users will be able to access OHSM's online data base thus negating the need for OHSM to generate the report.

Item 2 – In FY 2004-05, the actual number interviewed increased above planned because other agencies paid for additional samples for their own use such as better information (with a larger sample size) for a specific geographic area.

STATE OF HAWAII
PROGRAM TITLE:

PROGRAM-ID:

PROGRAM STRUCTURE NO: 050503

VARIANCE REPORT
POLICY DEV & ADVOCACY FOR DEV DISABILITIES
HTH - 905

REPORT V61
11/22/05

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES												
OPERATING COSTS												
POSITIONS	8.0	8.0			8.0	8.0			8.0	8.0		
EXPENDITURES	545	678	133	24	150	122	- 28	19	411	445	34	8
TOTAL COSTS												
POSITIONS	8.0	8.0			8.0	8.0			8.0	8.0		
EXPENDITURES	545	678	133	24	150	122	- 28	19	411	445	34	8
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06			
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % STRATEGIES COMPLETD IN HI STATE DD PLAN					75	71	- 4	5	100	95	- 5	5
PART III: PROGRAM TARGET GROUP												
1. INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES					22,934	22,934			22,934	23,180	+ 246	1
2. FAMILIES OF INDIVIDUALS W/ DEV. DISABILITIES					22,934	22,934			22,934	23,180	+ 246	1
3. PUBLIC & PRIVATE SERVICE PROVIDERS					30	60	+ 30	100	50	60	+ 10	20
PART IV: PROGRAM ACTIVITIES												
1. # OF STUDIES/ANALYSES CONDUCTED					4	1	- 3	75	4	3	- 1	25
2. #TRNG SESS FOR DD INDIV/THEIR FAMILIES/SVC PRVDRS					42	43	+ 1	2		35	+ 35	***
3. # COALITIONS DEV FOR INDIV W/DD & THEIR FAMILIES					2		- 2	100	2	2		
4. # SYSTEMS CHANGE ACTIVITIES INITIATED					2	2			2	2		
5. # PROJ FUNDED TO SHOW NEW APPROCHS INTO COMMUNITY					2	2			2	2		
6. # OF LEGISLATIVE MEASURES INITIATED					2	2			2	2		
7. # ADMINISTRATIVE POLICIES INITIATED					2		- 2	100	2	2		
8. # ACTIV INIT TO PROMOTE INTERAGENCY COLLAB/COORD					2	2			2	2		
9. # SUPPORTING ACTIVITIES					52	69	+ 17	33		60	+ 60	***

Variance Report Narrative
FY 2005 and FY 2006

05 05 03
HTH 905

PROGRAM TITLE: Policy Development and Advocacy for Developmental Disabilities (DD)

Part I - EXPENDITURES AND POSITIONS

Positions: There was no variance for positions.

Expenditures: For FY 2005, the variance was due to:

1. An increase in the program allocation for carryover of Federal unobligated balance from Federal FY 2003 and 2004, and
2. Collective bargaining augmentation (salary increases).

PART II - MEASURES OF EFFECTIVENESS.

For FY 2004-05, the percent of strategies completed in the State Plan was 71% rather than the planned 75%. The Council amended the State Plan to include additional and new objectives. Some objectives were amended to reflect current priorities requiring the Council to address.

PART III - PROGRAM TARGET GROUP.

Item 3: There was a significant variance in the number of private service providers from 30 to 60 due to the increase of individuals served in the Home and Community-Based DD/MR waiver.

PART IV - PROGRAM ACTIVITIES

Item 1: The variance in the number of studies/analyses conducted was due to other priorities requiring the Council to address.

Item 3: The variance was due to the Council having to convene a task force to address residential settings and to submit a report to the Legislature in response to SCR 79 SD1 HD1, and to assist in carrying out the requirements of the Medicaid Infrastructure Grant to increase employment outcomes for persons with developmental disabilities and the Family Support 360 Grant to create a one-stop navigational center for individuals with developmental disabilities and their families.

Item 7: There were no administrative policies initiated due to the Council's ongoing review of levels of care and residential settings issues and an initiative by the State to enroll individuals who are aged, blind and disabled into managed care plans.

Item 9: The increase resulted from issues regarding residential settings, individual budgeting, independent living, waiver services and supports, family support, dental care, and managed care.

STATE OF HAWAII

PROGRAM TITLE:

GENERAL ADMINISTRATION

VARIANCE REPORT

REPORT V61

11/22/05

PROGRAM-ID:

HTH - 907

PROGRAM STRUCTURE NO: 050504

	FISCAL YEAR 2004-05				THREE MONTHS ENDED 9-30-05				NINE MONTHS ENDING 6-30-06							
	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ACTUAL	± CHANGE		%	BUDGETED	ESTIMATED	± CHANGE		%	
PART I: EXPENDITURES & POSITIONS																
RESEARCH & DEVELOPMENT COSTS																
POSITIONS																
EXPENDITURES																
OPERATING COSTS																
POSITIONS																
EXPENDITURES																
TOTAL COSTS																
POSITIONS																
EXPENDITURES																
					FISCAL YEAR 2004-05				FISCAL YEAR 2005-06							
					PLANNED	ACTUAL	± CHANGE		%	PLANNED	ESTIMATED	± CHANGE		%		
PART II: MEASURES OF EFFECTIVENESS																
1. % OF GRIEVANCES RESOLVED					88	67	-		21	24	88	80	-		8	9
PART III: PROGRAM TARGET GROUP																
1. STATEWIDE POPULATION (000)					1,270	1,263	-		7	1	1,270	1,278	+		8	1
PART IV: PROGRAM ACTIVITIES																
1. # LEG PROPOSALS TRACKED FOR INFO OR TESTIMONY					1,000	1,397	+		397	40	2,000	2,000				
2. NUMBER OF GRIEVANCES REGISTERED					70	49	-		21	30	70	55	-		15	21

Variance Report Narrative
FY 2005 and FY 2006

05 05 04
HTH 907

PROGRAM TITLE: **General Administration**

PART I – POSITIONS AND EXPENDITURES

FY 2004-05

At fiscal year end, nine (9) general funded permanent positions were vacant, primarily due to retirement and/or vacancies caused by promotion to higher level positions.

The expenditure variance was due in part to less Federal fund expenditures by the State Office of Rural Health, Office of Planning, Policy & Program Development as well as in the Preventive Health and Health Services Block Grant.

FY 2005-06

At the end of the first quarter, of the eight positions vacant as of June 30, 2005, only three remained vacant but were at various stages of recruitment.

At fiscal year end, the net expenditure variance for the last three quarters is due to collective bargaining augmentation and estimated increase in federal fund expenditure over the remaining three quarters due to delays in expending federal grant funds earlier in the first quarter.

PART II – MEASURES OF EFFECTIVENESS

Due to new union agents not being trained to resolve grievances, a higher number of grievances have not been/will not be resolved.

PART III – PROGRAM TARGET GROUP

No significant variance.

PART IV – PROGRAM ACTIVITIES

Item 1. In fiscal year 2005, the bills tracked, monitored and/or testified was greater than planned because of the greater number of bills introduced by the Legislature of concern to the Department of Health. During FY 2006, the Department of Health expects to be on target as planned.

Item 2. In fiscal years 2005 and 2006, the variance is attributed to the Department's continued efforts to ensure that communication between management, the union, and the employee remains both open and clear. This effort is helps to minimize the number of grievances filed as well as improve and minimize the resolution process.

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